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To find a method of providing effective services to promote successful school experiences for all children and to prevent mental health disturbances in children, this project demonstrated the operation and tested the influence of sustained child behavior consultation with school people to increase their probable positive impact. The report reviews (1) the main aspects of the problem studied, (2) the general conceptual model which gave overall direction to the research and demonstration project, and (3) the directions taken and the results obtained in the program to date. (PH)

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INTERPROFESSIONAL

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ON

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SERVICES

CHILD BEHAVIOR CONSULTATION IN ELEMENTARY SCHOOLS:

A DEMONSTRATION AND RESEARCH PROGRAM

By

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Submitted as Part of a Final Report

by the

PERSONNEL SERVICES RESEARCH CENTER

at

The University of Texas at Austin

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During the first three years of the project, Dr. S. Thomas Friedman served as Research Coordinator and Dr. Loyce D. McGehearty served both as Field Coordinator and as the principal Child Behavior Consultant to the experimental (or "demonstration") schools. Various others also served as Consultants during the period of intervention in the schools; these included Dr. Charles M. Benjamin, Dr. Robert P. Boger, Dr. Bill S. Caldwell, Dr. William E. Field, Dr. June Gallesich, Dr. James L. Hubbard, Robert Higgins, Dr. L. F. James, and Donald Williams.

In addition to project personnel, our gratitude goes to the chief school administrators and the teachers of the North East Independent School District (San Antonio, Texas) and the Austin (Texas) Independent School District for their kindly reception and tolerance of this project. Without their constant cooperation, not even this essentially exploratory effort could have been mounted.

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The University of Texas at Austin
April 30, 1968

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CHAPTER I

ORIENTATION TO CHILD BEHAVIOR CONSULTATION RESEARCH IN ELEMENTARY SCHOOLS

In its 1962 research and demonstration program proposal to the National Institute of Mental Health (NIMH), the Interprofessional Research Commission on Pupil Personnel Services (IRCOPPS) made several salient observations which frame the general need for, and the focus of, work which the Personnel Services Research Center at The University of Texas at Austin initiated and pursued for four years in support of The Commission's objectives. Certain of these observations, reproduced below, need to be figural in the reader's attention, if he is to relate our demonstration and investigative program to the Commission's concerns in meaningful ways.

> 1. The basic purpose of...pupil personnel services is to help insure for every child...maximum opportunity for a successful school experience...Such services are intended to complement...classroom instruction...(and are needed) whenever a child meets a barrier to learning which he cannot surmount...(including the) more than... transient crises or emotional distrubances that interfere with...learning.
>
> 2. The Commission places emphasis on...primary preventive measures in the early years of school...(The) prevention of mental, emotional, and physical disorders is the task to which pupil personnel services need to devote their major research and work....There is...an urgent need to adapt functions and professional images to the primary objectives of the school.

> 3. The Commission seeks funds to carry out a...program of research on school mental health related services which will involve...a number of universities and school systems.
>
> 4. ...The field of the Commission's interest and competence (embraces 10 areas and) four types of research...:
>
> a. Studies of children and communities to determine...needs for pupil personnel services;
>
> b. Study...of methods of working with pupils and teachers;
>
> c. Demonstration and evaluation of pupil personnel services programs...;
>
> d. Studies of persons performing pupil personnel services....

Our demonstration and research plan was outlined in the final version of our proposal to the Commission on August 16, 1963. In formulating it, careful attention was given to most, if not all, of what appeared to be significant points in the Commission's own research and demonstration proposal to the National Institute of Mental Health. These points were reviewed above. They have continued to govern the work which we have conducted. Within the territory thus bounded, we believe our work has been carefully conceived and planned, although there have been major difficulities in its execution.

Aim of This Report

In subsequent sections of this report, we shall review (1) the main aspects of the problem we have attempted to study;

(2) the general conceptual model which has given overall direction to our research and demonstration effort; and (3) the directions taken and the results obtained in our program to date.

The Problem: General Orientation

It is our strong conviction that the Commission, in its own proposal to NIMH, spotlighted some of the main features of the general problem which we have been investigating at Texas. The core of this problem is this general question: How can effective services be provided which, in the Commission's language, "help insure for every child...maximum opportunity for a successful school experience," and which, furthermore, serve the cause of prevention, in children, of hampering mental health disturbances?

Characteristically, the schools have come to grips with this question by providing for the rendering (by psychologists, counselors, social workers, speech and hearing specialists, and others) of a wide array of direct services to children - services meant to complement classroom instruction. This is indeed a seductive approach to meeting children's mental health needs, but clearly it is not the only approach. In view of competent observations that there is little realistic hope that a sufficient cadre of skilled professionals can be developed to cope with the nation's mental health needs at the level of direct service, alternative approaches should be formulated clearly and tested adequately.

One alternative to the direct service model arises when it is recognized that the problems involved in stimulating "mental health" (construed here as adaptively competent behavior) and in coping with mental health disturbances demand for their solution the strengthening and more adequate utilization of resources already available in community institutions - e.g., teachers in the schools. As Bower (1964) has remarked,

> We must look to certain kinds of arrangements within the school itself. Resources (need to be) focused on assisting teachers and other professional people who work with children on a day to day basis... The clinics are going to be necessary for the severely disturbed child...but this is only a small percentage of the children who need help. (p. 13)

The premise underlying this alternative to direct service is that neither the prevention nor the alleviation of human distress is the prerogative of, or dependent on skills limited to, psychologists, psychiatrists, social workers, and related professionals (Lichtenstein, 1964). These functions are dependent, we think, on abilities and attitudes which all human beings possess in some degree. Since it is likely, however, that people at large vary in the degree of their interest, ability, and skill in such functions, one appropriate and profitable use of professional mental health personnel may be to stimulate the disinterested, to magnify the skills, and to modify the relevant attitudes of other people, such as teachers, who are currently performing mental health functions at some level of effectiveness. Teachers, counselors, the clergy, nurses, *et al.*, represent primary "caregiving professions", the ones most generally "directly on the scene" during people's life crises. How *they* perceive people and help them to deal with "crises" of living can help to move people toward or away from better mental health. What the teacher does or says to the child during a "crisis" in the classroom may be more significant than what transpires for that child two weeks later in a therapy situation.

Child Behavior Consultation with School Personnel: Alternative to Direct Service

The alternative to direct diagnostic and treatment services for school children which has been investigated in the IRCOPPS-sponsored demonstration and research program at The University of Texas is the provision of "mental health consultation" services to school people. Since, typically, consultation is sought by teachers and others about the learning and behavior difficulities manifested by children, we have chosen, at Texas, to refer to our service as "child behavior consultation." The goal of "child behavior consultation", where the school is concerned, is to modify the perceptiveness of school personnel, especially elementary school teachers, and thereby to enhance *their* abilities to work effectively with all children. Consultation, provided in the school by specially prepared Child Behavior Consultants to any professional school person requesting the service, is not "advice giving" in any conventional sense. Neither is consultation a "crutch" upon which the school person should become increasingly dependent in efforts to help children become effective individuals. It is, we believe, a resource through the use of which a school person is likely to learn ways - hopefully more skillful and independent ways - of dealing with children's problems as they arise, and on a continuing basis, in accordance with his own values and style of behaving.

Maddux (1964), has distinguished consultation from teaching, supervision, and psychotherapy.

> Consultation is not solving a problem for the consultee, but rather it is helping the consultee to do the job by himself...In consultation, the primary objective is to help the consultee master a (professional) problem.

Hubbard (1965) has made Maddux's point apposite to the school context by observing that

> the appearance of the consultant represents the most recent recognition of the importance of the teacher in...the school's counseling and guidance function.

Crisis Consultation

Crisis consultation has emerged as a relatively recent approach directed toward the enhancement, maintenance, or reestablishment of levels of functioning which are believed to be consistent with current conceptions of positive mental health. The importance of the crisis consultation approach lies in the possibilities it offers for maximizing gains from a relatively limited therapeutic intervention. Such an increase in efficiency could reasonably be expected to result in savings of time, manpower, and human suffering.

Modern crisis theory developed largely out of the work of Eric Lindemann, a psychoanalyst, who studied bereavement reactions. Lindemann (1944) described the reactions occurring in different individuals as a result of the loss of a significant person in their lives. He also outlined the phases through which an individual typically passes during the resolution of the crisis. In 1946, Lindemann, in association with Caplan, established a community-wide program of mental health in the Harvard University area (Morley, 1965). One outcome of this program has been the enunciation of crisis theory and the development of mental health consultation.

While the theoretical speculations underlying the crisis consultation approach are complex, an essential hypothesis appears in the assertion that a person in crisis is especially receptive to consultative intervention. Bindman clearly points to this assumption when he states that:

> Mental health consultation stems from crisis theory, particularly as expounded by Caplan. It is based upon the assumption that if a consultee asks for assistance while in a state of tension or crisis concerning an interpersonal relationship, then changes can take place more rapidly through consultative intervention (Bindman, 1966, pp. 79-80).

Caplan refers to this same assumption in his own work as follows:

> It is important to realize that during the period of... a crisis a person is more susceptible to being influenced by others than at times of relative psychological equilibrium (Caplan, 1966, p. 13).

Although several types of consultation have been identified in the literature (Bindman, 1966; Cohen, 1964), one type of consultation has been emphasized in this investigation. This is "consultee-centered" case consultation. According to Plaut (1961), the essence of this approach lies in the assistance the consultant gives the consultee in removing or reducing the influence of personal idiosyncrasies or problems on his (the consultee's) work with his clients. The emphasis is on freeing the consultee from stereotypes or misperceptions that interfere with his optimal professional functioning. The method employed for bringing about these psychological changes is the discussion of the case (the client) that the consultee presents. Presumably, if the consultee is in a state of "crisis", he should be especially receptive to "consultee-centered" case consultation.

Intervention, in the form of messages delivered by the consultant during the consultation session, presumably serves to enhance the ability of the consultee to cope with the crisis situation. Throughout this type of consultation the consultant ideally addresses himself to the situation as presented, with little or no direct reference to the underlying dynamics of the consultee.

Consultation in School Settings

Caplan has pointed out the opportunities available to offer mental health consultation services in school settings. He suggested consultation and collaboration with teachers and supervisors as one of the ways of adding to "their developing insights and skills in relation to specific children" (Caplan, 1962, p. 15).

Several variations of consultation services offered to school personnel are reported in the literature. Perkins (1953) described consultation services to public schools offered by a team of mental health specialists representing several disciplines. He reports that their success in follow-up work with individual cases seen at the Phoenix (Arizona) Mental Health Center led to consultation about the problems of other children before they were referred to the Center. Then came discussions of general problems encountered among students and how they arise, without particular reference to any one child.

Since 1952, the Division of Mental Hygiene of the Massachusetts Department of Mental Health has sponsored a program of mental health consultation which provides services to teachers (Caplan, 1959; Hallock & Vaughan, 1956; Vaughan, 1955). More recently, Gluck (1963) cautions psychologists who undertake consultation activities for the first time to be aware of the "administrative" or sociological aspects of the situation in which the consultation process takes place. He points out that the Superintendent, Principals, and Vice-Principals all determine the areas in which the consultant can work, the types of problems with which he will be asked to help, and the possible range of problems confronting him. Another aspect of the consultation process is discussed by Berlin (1962), who addresses himself to the way in which the consultation process lends itself to the communication of certain mental health principles to teachers and administrators.

Reported Research on Crisis Theory

Bindman (1966) published a paper with an extensive bibliography of consultation literature. He reported that a review of the literature on consultation reveals that only one study, that reported by Cutler and McNeil, examined the results of mental health consultation.

The Cutler and McNeil (no date) study is based on their deliberate decision to invest more energy in the training of preventive personnel and less in direct service to children. They were influenced by the work of both Redl and Caplan. Their basic research design was a pre-to-post condition evaluation along the several dimensions with which they were concerned. A prime instrument in their study was Leary's Interpersonal Check List. Measures were of the self-report variety. Their program of mental health consultation was applied in the Oak Park, Michigan, public school system. Subjects in the study were the teachers, students, and their parents. The results indicated significant changes in the teachers who participated in the mental health consultation program. In addition, these teacher changes appeared to affect the children in their classes, in a positive fashion.

Cutler and McNeil's experiences led, in part, to the following recommendations: a) more time to be spent in individual consultation with teachers, and somewhat less in group meetings; b) a better research methodology, with less emphasis upon the Interpersonal Check List as a prime instrument; c) more research emphasis upon a small sample of teachers and pupils, with attention to dimensions of the consultation process.

The only reported piece of research dealing explicitly with crisis theory was conducted by Bloom (1963). Bloom's paper is addressed to the question of whether experts in the field of crisis theory are able to agree in their differentiations of crisis states from non-crisis states, that is, from ordinary day-to-day problem-solving behavior. He takes the position that, "relevant life events must be unambiguously sortable as either crisis or not crisis" if the timing of focused intervention is of controlling importance.

Bloom devised a test instrument utilizing 14 brief case histories. Each case history was constructed to appear realistic, yet each contained information pertaining to (a) the awareness or lack of awareness of a precipitating event; (b) the rapidity of onset of the disruption; (c) presence or absence of internal discomfort; (d) external evidence of behavioral disruption; and (e) rapidity of resolution of the conflict. He started by dichotomizing each of the above five components. Then 13 of the stories were constructed so that the five variables under study appeared in more or less random conjunction with each other. The fourteenth story involved a known precipitating event followed by no symptoms of any kind. A group of professionally trained mental health workers served as judges during the construction of these stories, and a story was included in the final instrument only if there was 80 percent agreement as to the presence or absence of all five components. The final test contained considerably more stories in which a precipitating event was present than those in which no precipitating event was known. With the exception of this variable, the stories distributed themselves nearly equally in regard to each component.

This instrument was individually administered to eight experts in the field on crisis theory. The judges were asked if the event depicted in each story constituted a crisis for the victim. The responses of the judges were limited to "yes," "no," or "do not know." They were also asked why they checked the particular alternative they chose in each case.

The results revealed that in only 5 of the 14 stories were the crisis judgments unanimous. In the remaining 9 stories, "yes" percentages ranged from 20 to 86. In only five stories were there no "do not know" judgments. The 14 stories were repeatedly subdivided so that judgments to all stories containing each component could be contrasted with stories not containing that same component. The judgment of crisis was made significantly more often when there was a known precipitating event--and was made significantly more often when there was a slow resolution (between one and two months).

Bloom's results seem to indicate that in practice, a crisis is defined primarily in terms of knowledge of a precipitating event and secondarily in terms of a slow resolution. Beyond this, however, when judgments concerning the five experimental variables defining crisis were analyzed in various combinations, in no case was significant difference found. Within a group of episodes in which precipitating events were known, there appeared to be no way by which crisis could be reliably judged on the basis of subsequent reactions.

CHAPTER II

THE RESEARCH PROBLEM AND BASIC MODEL

Our general problem for programmatic research was formulated as an attempt to test the proposition that various professional personnel who work with children in the elementary school, but especially the teacher, will be enabled through child behavior consultation services to learn new, presumably better, ways of perceiving and understanding pupils' problems, and thus to become more effective preventive workers relative to the mental health of children. In summary, we proposed to demonstrate the operation, and test the influence, of sustained child behavior consultation with school people as a means of increasing their probable positive impact on children's "mental health". If efficacious, consultation might be a valuable adjunct function to be engaged in either by properly trained pupil personnel workers or as a service which might be provided to all school personnel by mental health professionals.

A Conceptual Model

Insofar as we and others (e.g., Knutson, 1963, p. 302) are aware, no impressive body of valid evidence is yet available for use in evaluating the effectiveness of mental health consultation with school personnel, public health nurses, or other professional groups. Four years ago, and today, the comparatively few empirical studies completed have had one or more of several kinds of difficulties.

These difficulties have imposed more or less severe limitations on the decisiveness of the existing studies. In some instances, as was pointed out in the previous chapter, the research difficulties appear to have centered around the relevance of the measuring instruments used in research. Sometimes, also, there may have been inadequate training of consultants, or deficient monitoring of their consultation activities. Furthermore, there may, on occasion, have been such great and unsystematic variation in the character and conditions of consultation as to vitiate any significant general outcomes in consultees. Again, the amount of consultation sought or accepted appears not to have been checked out. Still other inadequacies in prior research could be pointed up without in any sense demeaning the efforts of investigators in this complex field.

One kind of improvement we have sought to make is that of conceptualizing how it might be that consultation could have differential effects on individual teachers, counselors, or any other class of consultee. We have tried, therefore, to create a model which (1) does some justice to the complexity of the important factors apparently involved, (2) which, therefore, points to the classes of variables which should be measured, and (3) which is explicit enough to be testable by multivariable statistical designs programmed for use with high capacity, high speed computers.

It will be useful, perhaps, to review this general model (Fig. 1) to which the Texas Consultation Research has been bound. In overview, it proposed that pertinent changes ("output") in teachers could be brought about by consulting with them about pupil behavior problems which occurred in their experience, which caused them concern ("crisis"), and which they brought into their relationships with skilled consultants. Child behavior consultation, thus, was, at one and the same time, (1) the input into the school system - particularly to its teachers; (2) the independent, or treatment variable in the language of experimental design; and (3) one of the major predictor variables in multiple correlation or regression equation terminology wherein one seeks to account for, or to "explain," the maximum amount of variance among persons in some important criterion, dependent, or "output" variable.

A need has long existed for a careful demonstration study of the effects on preventive mental health behaviors produced by the deployment of mental health personnel in institutions where they can exert maximum influence upon members of other concerned professions so that a reasonable portion of these professionals' activities are brought to bear upon prevention. American school systems constitute strategic institutional settings for such demonstration and research work, because they have sustained relationships with children and youth over an extended period of critical years for mental health. The people who have the most intimate and

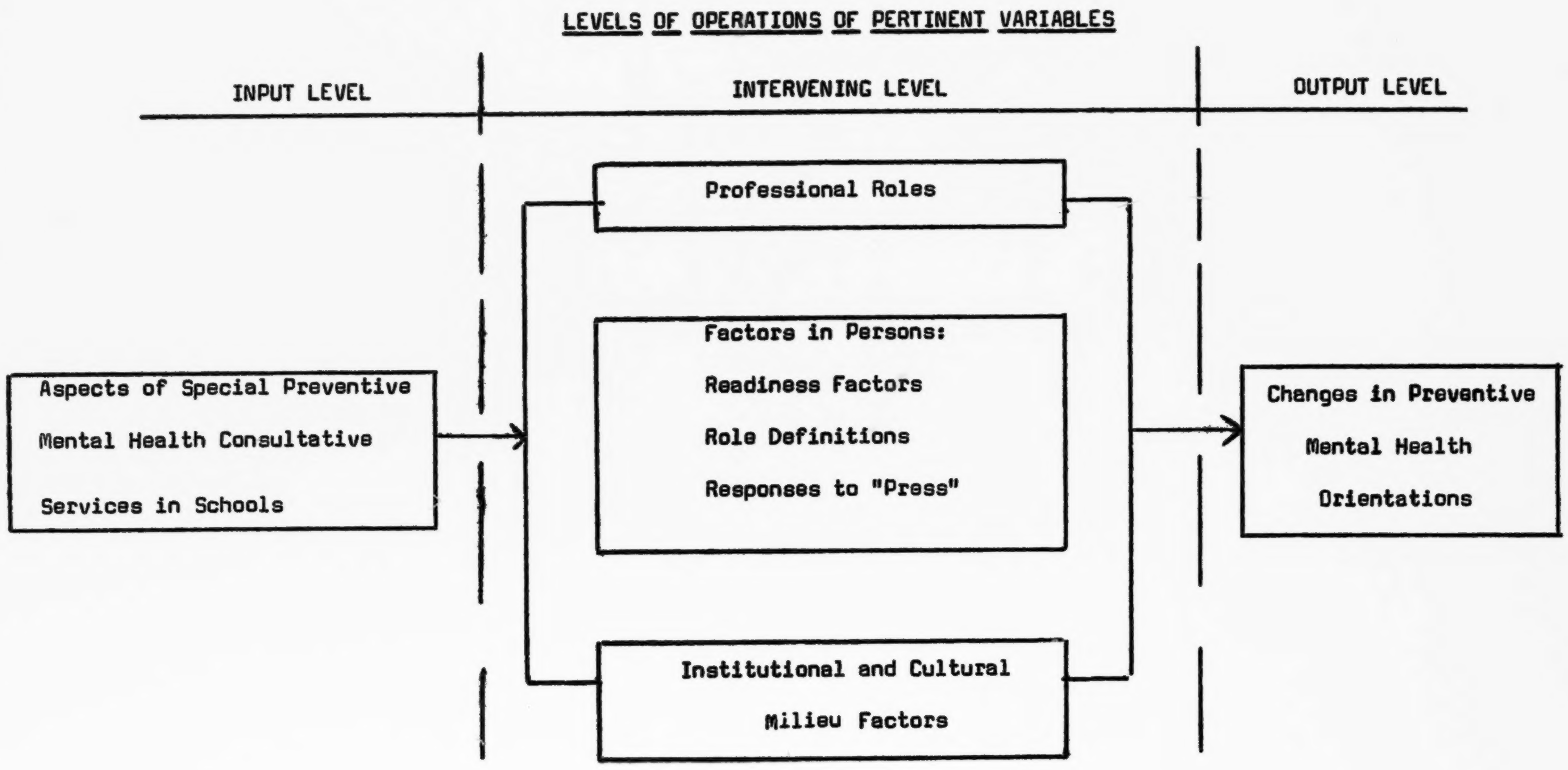
LEVELS OF OPERATIONS OF PERTINENT VARIABLES
INPUT LEVEL
INTERVENING LEVEL
OUTPUT LEVEL
Aspects of Special Preventive Mental Health Consultative Services in Schools
Professional Roles
Factors in Persons:
Readiness Factors
Role Definitions
Responses to "Press"
Institutional and Cultural Milieu Factors
Changes in Preventive Mental Health Orientations

Fig. 1. - Paradigm of the Process of Influencing the Preventive Mental Health Behaviors of Pupil Personnel Specialists and Teachers

enduring relationships with children in elementary schools are the teachers. If these school professionals can become more strongly oriented toward the prevention of mental health disturbances in children and youth as a result of their utilization of the consultative services of mental health professionals over a relatively lengthy period, the influences of mental health professionals will have been multiplied to a great extent.

We proposed that teachers can be provided, programmatically, for two years with the consultative services of mental health personnel whose efforts would be directed toward strengthening the preventive mental health orientations of the school people. We have proposed, further, that the effects of such mental health consultative programs on pertinent characteristics of teachers can be systematically assessed.

Will systematic mental health consultative-educative services provided by special personnel to teachers produce identifiable and significant changes in the preventive mental health orientations of teachers in relation to children? What factors in individual members of the school's professional staff moderate (facilitate or otherwise modify) the influences of a carefully planned, sustained program of mental health consultation provided by especially trained personnel? Such questions as these constitute major grounds for this research and demonstration project, and they include many of the questions for which we have proposed to seek answers.

It was proposed initially that variations in the "preventive mental health behavior" of teachers could be explained, or predicted, in terms of variations in (1) the degree of utilization (or "press") of a special preventive mental health consultation program; (2) specific personal and professional readiness factors, such as the individual's prior training or the degree of his concern with specific kinds of child behavior problems; (3) the role conceptions and expectations held by teachers; and (4) certain operative cultural and institutional milieu factors, such as the perceptions which teachers hold of the morale and goals of the school.

The foregoing proposition can be expressed in a quasi-mathematical model, which is readily adaptable to treatment by multiple linear regression methods employing measures obtained by devices developed in the research and demonstration project's early months.

$$\sum_{S}^{O}{}_{B} (pmh)_p = fU_c \, (R_p, D_{p,o}) \, M_p$$

The notation used immediately above is defined below term by term.

$\overset{O}{\underset{S}{\Sigma}} B\ (pmh)_p$ = The preventive mental health behavior of a school professional person (p) as evaluated by significant others (O) or self (S). Significant others may include professional mental health specialists, professional colleagues in the school, pupils, parents, et al.

U_c = Utilization of a special consultative-educative program focused on the production of preventive mental health behavior by pupil personnel specialists and teachers, or the "press" of the program upon the school professional person.

R_p = "Readiness factors" in the pupil personnel worker or teacher, such as prior training in fields related to understanding mental health problems of children or competence in understanding the psychodynamics of pupil behavior.

$D_{p.o}$ = Role definition factors (perceptions, expectancies) which the school professional person (p) has acquired about significant others (o) in his professional behavioral field, e.g., the tendency to ascribe responsibility for preventive or ameliorative services to other professionals.

M_p = Milieu factors (either institutional or in the culture in a larger sense) perceived by the professional person, the consultee.

The foregoing paradigm is expressed schematically in Figure 1, shown earlier in this Chapter.

While it is clear that one extremely important, indeed primary, set of criterion behaviors to be investigated and influenced consists of the preventive mental health attitudes held by teachers, other criteria which should be studied and changed through consultative intervention in future work are also implied by the model which has been proposed above. It is implied, for example, that intraprofessional and interprofessional role definitions (expectations, perceptions) can be investigated and influenced. It is also implicit in the model that various "readiness" factors should be open to modification. To the extent that changes can be produced in any of the various elements of the paradigm, it can be predicted that the preventive mental health orientations of the school's professionals will also be affected. Even where some elements of the model are not open to influence their effects should be susceptible of investigation provided such elements, or variables, can be measured or categorized.

All of us are aware, of course, that there is seldom anything approaching a one-to-one correspondence in complex systems between "input" and "output"; antecedent treatment and consequent effect; or single predictors and target criteria. For example, the effect of fertilizer on the net yield of corn is surely a function not only of the amount and composition of the fertilizer used, but also of the characteristics of the seed which is planted, the soil in which the seed develops, the amount of available moisture, and a host of other variable factors which may even include the method of harvesting the crop and the capabilities of the harvesters.

Analogously, the influence of child behavior consultation on a given teacher is not likely to be any simple function of the amount and kind of consultation which that teacher receives, but, rather, a joint function of the consultation, of the characteristics of the teacher, and of psychological features of the school milieu as perceived. The latter two classes of factors surely intervene between input and output - between consultation and teacher change - and they may facilitate or suppress the effects of consultation in complex ways which need to be understood.

These, then, are the kinds of considerations which our overall theoretical model seeks to take into consideration and to specify. In essence, it is predicted that the effects of consultation on any specified criterion or "output" behavior variable will be a complex joint function of the extent to which individuals utilize the consultation services, interacting with several characteristics of these school people themselves, and of certain factors pressing on them from the school-community milieu.

Models: Their Virtues

A "model" is an invented or constructed thing which puts concepts and observations together in such ways that both the concepts themselves, and the data related to them, become ordered and meaningful. Models generally manifest a degree of correspondence with underlying theories which specify elements or variables that "make sense" out of whatever it is that one seeks to understand, predict, or explain. Each element or variable in a model has, of course, to be understood, not by itself, but in terms of its place in a reticulum of relationships. Such models make their chief contribution to our understanding of phenomena when they can be expressed mathematically so as to allow the ordering and manipulation of relevant data in ways which test the likely validity of the predictions or explanations to which they give rise.

Our child behavior consultation research, then, has been linked to a "conceptual model" which is interactive in character and whose essential general concepts and their interrelations are given diagrammatic representation in Figure 1. Contextually, this model provides for child behavior consultation to produce changes in certain characteristics of the educational personnel who employ consultation. In our work we have been focally concerned with the production of changes in educational personnel and we have expected these to occur differentially from person to person and school system to school system depending on various specified intervening factors in persons and in their perceptions of their environments. You might say, then, that our full conceptual model is a "catalytic" one which, for purposes of formulation can be expressed in meta-mathematical form as shown earlier in this Chapter with the notation as defined at that point. The model, thus, expresses the basic theory that changes in the "mental health promoting" behavior of the person are a function (f) of his utilization of consultation (U_c), his readiness (R_p) to profit from consultation, the ways in which he defines his role ($D_{p.o}$) relative to other available professional roles, and other classes of factors.

Instruments, Data, and the Model

Much of our IRCOPPS Research at Texas has been devoted to developing instruments which were expected to reflect individual differences in variables belonging to the various classes of factors specified by our general model. This hoped for isomorphism between constructs and measures has seemed essential if a theory of how consultation works is to be tested even in preliminary ways. There is little value in trying to test out a model by making observations and measurements unrelated to the model. Indeed, as is obvious, we shall never be able to decide with any substantial confidence whether or not consultation (or any other service in the schools) is efficacious unless relevant data-gathering devices are used. When data obtained by measures of the variables pertaining to the various terms of the conceptual model are in hand, however, we are in a position to test the validity of the model.

CHAPTER III

CHILD BEHAVIOR CONSULTANTS, THEIR TRAINING AND WORK SETTINGS

The name, Child Behavior Consultant, was chosen after careful consideration of the possible adverse effect of the term Mental Health Consultants or other terms possessing mental health connotations. It was believed that Child Behavior Consultant was more appropriate for the task at hand, and would allow for a much freer interaction with the consultees and incidentally would arouse less anxiety and suspicion in the school districts concerned. Having selected an appropriate name, the task then arose as to how to train the Child Behavior Consultants. Previous researches employing varieties of consultation styles and consultants to public schools have involved at best four or five psychologists. The challenge of providing child behavior consultation to a variety of schools was a great one indeed, and it became apparent at the beginning of planning that not only was there a virtual lack of experienced school consultants, but that what few school consultants there were would require financial remuneration far beyond the budgetary possibilities of the project. Taking advantage of the fact that there were developing programs in the area of community mental health within the Department of Psychology and a School Psychology Program developing in the Department of Educational Psychology, and also calling upon expressions of interest from other sources, it was decided to utilize third and fourth year graduate students in Educational Psychology or Psychology as the Child Behavior Consultants. The task of training at least eight consultants in a relatively short period of time was met with perhaps more enthusiasm than the situation or common sense dictated. The staff of the project went through considerable exploration of methods of mental health consultation and basically settled upon an orientation to consultation essentially similar to the one advocated by Gerald Caplan (1959). With some modifications, this consultation model was the one that the staff familiarized itself with and the one that was taught to the students.

In the Spring of 1964, a series of seminars were conducted on a weekly basis to familiarize staff and graduate student trainees in child behavior consultation with the fundamentals of the Caplanian model. A variety of resources were employed including role playing, demonstrations by the person in charge of training consultants (Iscoe), and various references to the consultation process (Bindman; Caplan, 1963; Caplan, 1964; Caplan, 1956; Plaut, 1959).

The majority of the trainees in child behavior consultation had had some experience in psychotherapy or counseling. The shift to the consultation model was not easily made in many cases. It became apparent that a clear differentiation had to be established between doing psychotherapy with a teacher and carrying on consultee-focused consultation. Gradually, however, the students began to recognize that in this type of consultation the emphasis is on the data that a consultee (for example a teacher or principal) presents about a particular problem, most likely a child or other teacher. The problem is seen through the eyes of the consultee. The consultee and the consultant are in a peer relationship, and it is this relationship which distinguishes consultee-focused consultation from the more traditional expert vs. non-expert model. Additionally the students gradually also came to accept the fact that in its ultimate aspects consultee-focused consultation was a form of in-service training in which the teacher as a teacher and the consultant as a child behavior expert traded knowledge. The objective was not to make the teacher into a child behavior expert, but to help her function more competently as a teacher. This aspect of "competent coping" was stressed throughout the training sessions and indeed dominated the supervision of trainees when their consultation sessions were monitored.

It would have been fortunate and much easier had models for consultant training been readily available. Unfortunately the state of the art at the time the project was started was such that the investigators had to make many judgments and many decisions in essentially novel territory. The zeal with which most of the consultant trainees eventually grasped the model was gratifying. However, it certainly would have been helpful in the first year if more written materials had been available.

Monitoring and Supervising Child Behavior Consultants

It is understandable that, at the beginning, a tremendous investment of time was necessary in order to help the consultants get started. Despite heavy emphasis on the theory of crisis, crisis intervention, and actual practice in client-centered consultation, the first few sessions for most of the CBC's were traumatic indeed. Part of this arose from anxieties in regard to the new role, and part of it was contributed by the difficulty of the teachers in perceiving the role of the child behavior consultant. Despite careful preparation, most of the teachers viewed the CBC's as essentially child psychologists who were going to deal with children and test them. The insistence on the part of the CBC's that they would prefer to see the children through the eyes of the consultees (teachers), rather than see the child or children themselves, met with some opposition and the question of "how can you help a child if you do not see him personally". Each consultant, in his own way, had to re-explain to the teachers what the function of the child behavior consultant was. There were, of course, further difficulties in the scheduling of consultations and in finding a place in which to work. It is, of course, axiomatic that schools in the better parts of the city have more free space. Those in the lower class districts are crowded and have no space for a consultant and consultee to confer in private. The consultants also had to become accustomed to "consulting on the run", i.e., while a teacher was walking to class or in between classes in the teacher's lounge. Gradually as the consultants acquired more experience they were able to work out their own arrangements for seeing teachers. Some of this was accomplished by rearranging schedules and some by waiting for teachers after school had been dismissed. It was found that in most cases, if the consultant had lunch at the school, somehow an interested teacher managed to sit beside him and consult "informally" with the consultant about a particular problem of the child or of the school. Gradually requests for the consultant to "see" or "test" children diminished. A consultant visited a school one afternoon or one morning per week with occasional special visits.

While the role of the school psychologist or the child clinical psychologist is fairly well defined, in that they are supposed to get down to business and work with the problem at hand, the role of the child behavior consultant was, at the beginning, strange to both consultant and consultee. The schools had hidden agendas and, in addition, quite frequently the principal and some teachers had ways of manipulating the consultant. One consultant who later turned out to be extremely capable almost quit the project because a principal had kept him waiting for more than an hour and a half while he attended to other business. Still another one faced the bleak prospect of no "cases" for four weeks in a row; an emergency arose suddenly and the consultant was needed and wanted. In various ways, each consultant was manipulated to some extent. During this period the supervisor (Iscoe) worked on the anxieties of the consultants and kept pointing out that a fundamental process in good consultation was indeed to be manipulated for a while. As long as the consultant recognized that he was being manipulated at the appropriate time, and in the appropriate situation, he could stop the manipulation. This lesson was learned the hard way by many consultants and of course ran contrary to the training that some of them had had in counseling and psychotherapy. Nevertheless no consultant failed to go through the manipulation experience and at the end all of them felt that they had learned a great deal from it and that they had worked out ways of dealing with it.

In recognition of ethical responsibilities to the children, the teachers, and to the schools, the supervisor was available night and day to the eight consultants who initially started the 1964 school year. A two to three hour seminar was held every week in which consultants reviewed their cases and problems. In addition, each consultant met for at least an hour a week with the supervisor for the first few months of the project until he was satisfied that many of the initial problems were being ironed out. Quite frequently the consultants called the supervisor at home in the evening in order to discuss particularly knotty problems and to ask for advice. It should be recognized that the process of training consultants is an ongoing one and that the supervision in itself is an aspect of training. In order to make sure that the consultants were grasping the full purpose of consultation they were, at the beginning, required to write out one or two of their more outstanding experiences as well as to turn in a description of the school they were operating in including its salient characteristics. This latter assignment proved to be most rewarding in that it forced the consultant to take a look at the school not as a group of teachers and classes but as a system. The consultant then worked within the framework of the stresses and strains on that particular school.

Data Gathering on Child Behavior Consultation

With the potential for many hundreds of consultations on many hundreds of children a decision was made to develop a standard consultant report form. In this way a degree of objective reporting was obtained making it more feasible to transfer the data from the consultant report form onto punch cards. While no doubt an extremely rich body of materials could have been gathered should resort have been made to anecdotal reporting, the task of coding and processing anecdotal reports was too much for the project considering limited finances and personnel. Checks upon reliability were made by having two consultants listen to one consultee and then check the ratings made separately on consultant report forms.

Consultants coming into the project at the second year of CBC activity were trained individually and also given field experience by accompanying a now experienced consultant.

From time to time a consultant experienced unusual difficulties in a school. Sometimes this was due to a change in the administration of the school or more likely due to some pressing problem in the school that focused on a particular problem or issue that the consultant did not feel competent to handle. In cases such as these, the supervisor sometimes accompanied the consultant to the school and helped iron out the difficulties. The presence of the supervisor tended to raise the confidence of the consultant and also indicated the concern of the project for the best interest of all concerned.

Cooperation of the Schools

Two school systems were involved in the project: the North East Independent School District, San Antonio, Texas, (Community A) and the Austin Independent School District, Austin, Texas, (Community B). The degree of cooperation elicited from these schools was exemplary but, of course, not obtained without a great deal of preliminary work. The acceptance of the project by the superintendents of the school systems involved was the first step and was made possible by the high regard for The University of Texas, Department of Educational Psychology and Department of Psychology. The project was "sold" to the school superintendents as one designed to study the more effective use of school personnel. The purpose of IRCOPPS was explained and the reason for using the term "child behavior consultant" was also explained. The purpose of consultation, it was emphasized, was to broaden the skills of the teacher so that she could utilize her abilities to a full degree. The term "effective coping" was frequently used rather than adjustments. In selling the project no claims were made for miracle cures but the belief was put forth that effective consultation could resolve some of the problems of the children that were referred. The research project and the treatment of data were also explained and assurances were given as to anonymity as far as the teachers as individuals were concerned. The obtaining of control schools was perhaps the most difficult concession to be asked for. It was explained that only through the use of control schools could the full impact of consultation be assessed. The control schools were vital to the project even if they did not get any direct services from the consultants. Each superintendent obtained the permission of his school board, describing the project in his own terms and endorsing it.

The North East Independent School District is a relatively prosperous district with at least two schools having Mexican-American populations and a lesser percentage of Negroes. The Austin Independent School District has a heterogeneous population and attempts were made to include schools so as to sample the widest variety of pupil problems possible. In all, some 28 schools, 14 experimental and 14 control were involved in the project for a two year period. A description of the schools and a brief characterization are as follows:

Community A

Experimental Schools	Characteristic	Control Schools
Colonial Hills	Upper Class	Castle Hills
Dellview	Middle Class	Coker
Jackson-Keller	Lower Middle Class Some Mexican-American	East Terrell Hills
Oak Grove	Lower Middle Class Some Negroes	Harmony Hills
Serna	Anglo and some Lower Middle Class Mexicans	Northwood
Walzem	Lower Middle to Middle Class Some Negroes	Olmos
Wilshire	Middle Class Predominates	Ridgeview
Larkspur	Lower Class, Whites Predominate	Windcrest

Community B

Experimental Schools	Characteristic	Control Schools
Becker	Mexican-American Some Anglo	Blanton
Blackshear	Negro, Lower Class	Campbell
T. A. Brown	Middle Class Mixed Population Anglo, Negro, Mexican	Govalle
Palm	97% Lower Class Mexican-American	Zavala
Pecan Springs	Lower Middle Class Some Mexicans	Travis Heights
Sims	Negro, Approximates Lower Middle Class	Rosewood

The selection of the schools was aided by long consultation with the directors of Pupil Personnel Services for both school systems and the superintendents. Selection was also governed by the opinion of the superintendents as to the degree of cooperativeness of the principals of each school. Once the schools had been selected, the staff of the project met with the principals of both experimental and control schools in an hour long session, which answered questions and again explained the project. In both the North East Independent School District and the Austin Independent School District, the superintendent also attended the meetings. Questions about selling the service to the teachers arose and each principal worked out his own approach to this problem. Most chose to have one of the project staff come and explain the situation to the teachers in the experimental schools. The North East School District, in addition, scheduled a meeting at which all the teachers, or most of the teachers, from both experimental and control schools attended and had the project explained to them. This was in addition to the individual explanations given to some of the schools by project staff and in some cases by the consultant. It might be mentioned parenthetically that, although the explanation to the teachers took the same form as the explanation to the school superintendents and to principals, it was soon learned by the staff and consultants that repetition of the purpose of the project was necessary. In fact, even though an explanation was given at a faculty meeting in most schools, many consultants were bewildered that individual teachers at the beginning did not seem to grasp the purpose of the project. Some felt that it was a research project designed to evaluate teachers and others felt that something was afoot that would affect teachers adversely. It took much work and a great display of good will to overcome this initial suspicion. Although this suspicion was not evident in every school and, indeed, in some schools consultants found little or no difficulty, it still remains a fact that the problem of entrance to the school was perceived as one of the most difficult faced by the project in its entirety.

Once the consultant had been introduced to the teacher in a faculty meeting, decisions were made about how his or her services should be scheduled. In accomplishing this purpose, there was a great deal of variation. In some schools the principals took charge and scheduled teachers for conferences. One or two principals stated that they would like to sit in on the conference with the teachers and in one school, in particular, it took several months before the principal would let the consultant meet with the teachers without his being present.

The periods of resistance or hostility on the part of the teachers, understandably coincided with the administration of test instruments. Consultants indicated again and again that they were not privy to the information contained on the test instruments and that their job was child behavior consultation. It was necessary to do this in order to separate the child behavior consultants from the research project. Teachers gradually came to accept the consultants apart from the administration and readministration of test instruments. Consultants quickly came to realize that the tone of schools, of any school, was set by the attitude of the principal. It was therefore necessary to check in with the principal upon entering the school and spend some time with him before proceeding to appointments.

The relationship between consultant and principal was stressed as a primary factor in maintaining good contact with the school. Consultants early learned to gauge the temper of the school by the actions of the principal. They also very quickly learned that not every school contains a principal beloved and respected by the entire faculty. The recognition of the internal pathology of the school soon became one of the main sensitivities of the consultants. A new principal would ask questions of the consultants markedly different from those of a more experienced principal. This recognition of individual styles of school was stressed in the training and monitoring of consultants.

As an added protection for the children in the school, and as an internal check on the activities of the consultants, the supervisor made a point of contacting each principal at least twice during the school year. The contact was informal and gradually led up to a discussion of "How is the consultant getting along in your school?". A question of a similar nature might be "How are you using the consultant these days?". The general reaction from the principals was favorable, in that they felt that the consultants were doing a good job with the teachers. In cases of highly negative reports, interventions of various sorts took place. In one unfortunate incident the consultant had to be transferred from the school and was not continued on the project. In another instance, one consultant was transferred, based on a request by the principal who felt that although the consultant was competent, he could not understand the problems faced by the teachers in dealing with this particular ethnic group and socioeconomic level.

In all, some 15 Child Behavior Consultants were utilized in the two year period servicing the 14 experimental schools. While it would be comforting to state that all functioned equally well, it would be naive to do so. Rather obvious strengths and weaknesses emerged from consultants rather quickly in the game. There was great variability with which the graduate students adopted and effectively used the consultation model. While no personality or behavior measures were employed on the Child Behavior Consultants, it did become clear that the older, more mature graduate students, more readily adapted to the consultant role. There may, of course, have been an interaction between the youngness of the Child Behavior Consultant and the consultees. It appears, however, that a degree of prior experience as a teacher or in face to face contacts generally, were assets in achieving a higher degree of competence in child behavior consultation.

It also became clear that some students were so embued with the psychotherapy model, that they could not effectively adopt a consultation role. Implications for the training for child behavior consultants are several. Based on our experience, it is recommended that the utmost care be taken in the selection of consultants and that they actually be observed in consultation for a period of time before they are permitted to carry out consultation on their own. Consultation involves the gradual accumulation of the requisite skills. In order for this to occur, there is need for a period of rather constant monitoring and supervision. There is the recognition, stated by the trainee, that child behavior (mental health) consultation requires more security and more thinking on one's feet than does psychotherapy. While the therapist may take refuge behind various techniques and wait for the client to repeat whatever he said previously, the consultation encounter is of a different nature with the consultee seeking answers and the consultant trying his best not to provide answers immediately, hoping that the teacher or consultee will begin to work out other possibilities of approaching the problem that has been referred. The eagerness with which many teachers sought out their consultants, only serves to confirm the feeling so well expressed by Sarasion (1967), "The teacher in the self-contained classroom is a lonely person indeed". Although it appears that there are many resources that she can turn to, such as her own colleagues or principal, or her curriculum supervisor, the truth of the matter is that in all but rare instances, she keeps most of her problems to herself, hoping that they will resolve in the course of time. Many of the consultants felt difficulty in maintaining the consultant relationship and not becoming "friends" with the teacher. It was stressed in training and supervision that the two roles are not incompatible providing the consultant understands the implications of each.

CHAPTER IV

INSTRUMENT DEVELOPMENT: DEVICES TO MEASURE DEPENDENT VARIABLES

In Chapter II, the conceptual model or paradigm which has been basic to our demonstration and research enterprise was described. In order to make the paradigm operational, however, substantial work has had to be expended in the development of instruments to measure various classes of the variables specified by the model. Even so, however, not all possible variables derivable from the model have been made subject to measurement in the present project. This Chapter will be used to describe those devices which have been developed to measure dependent variables at the "output" level in teachers - in effect criterion variables.

Criterion Measures

A primary purpose of this project has been to determine if changes in the orientations of elementary school personnel toward children would be influenced predictably, over time, as a consequence of child behavior consultation provided for two school years by well-trained and monitored Child Behavior Consultants (CBC's). Obviously, then, criterion measures of "preventive mental health orientations" have been needed. We have tried to fill the need by developing two basic instruments: (1) a self-report device entitled, non-committally perhaps, Dimensions of Teachers' Opinions (DOTO) and (2) a set of rating scales to be filled out by each Child Behavior Consultant (CBC) after each session with a teacher consultee. Each of these instruments was devised with the hope that it would reflect both variations and changes in "mental health promoting" aspects of teachers' orientations toward children.

Dimensions of Teachers' Opinions (DOTO)

This self-report inventory (see Appendix) consists of 110 statements to each of which respondents were asked to register their attitude on a response scale ranging from "1" (Agree rather strongly) to "5" (Disagree rather strongly). Representative items include the following:

2. Demonstrations of affection by teachers are unnecessary because learning is basically an unemotional experience.
19. Students who are not well liked by classmates need the teacher's help in learning to "get along" with others.
53. The best thing a teacher can do for a seclusive, retiring child is to make him stand up to life's demands.

Initially, DOTO was developed from items written by three psychologists in an attempt to measure such construct variables as the "Sophisticated Management of Children" and the endorsement of sophisticated or informed as contrasted with naive or superficial mental health concepts, these being regarded as among the characteristics of school people which should be most amenable to the changes which would be sought for through consultation. As with all of the self-report instruments used in the present project, the validity of DOTO rests, in the first place, on content.

DOTO began as a 60-item preliminary instrument which was administered to a sample of some 239 Texas elementary school teachers and, subsequently, the intercorrelations among all 60 items were factor analyzed (principal axis method with varimax rotation). This factor analysis yielded 21 item factors, 16 of which appeared meaningful. Based on an interpretation of these 16 item factors, new items were prepared so that a total of 110 items was achieved. Subsequently, the 110-item form of DOTO was administered to 621 elementary school teachers in the communities of upper St. Louis County, Minnesota. This was done in order to obtain data for image-type factor analytic studies of DOTO's items for the establishment of constituent measurement subscales. According to Veldman (1967), image analysis is the preferred technique for this purpose.

Table 1 presents the items which loaded ± .30 or higher, uniquely, on one of five image factors in the Minnesota sample. In addition, the names which have been assigned to these DOTO factor scales are shown. These are:

Factor I.	Permissive *vs.* Authoritarian Orientation to Children
Factor II.	Sophisticated *vs.* Naive Management of Child Behavior
Factor III.	Superficial *vs.* Informed Mental Health Concepts
Factor IV.	Not Interpretable
Factor V.	Direct Efforts to Help Children *vs.* Ignoring

In the image analysis six factors actually emerged, but the sixth factor showed no loadings of ± .30 or higher. Therefore, it was deemed unimportant and unclear, and was dropped from further consideration. In summary, only four DOTO factors were considered to be interpretable and worthy of use as subscales in data analyses made for this project.

Table 1

Factors Identified in Dimensions of Teachers' Opinions (DOTO) for 621 Minnesota Elementary School Teachers

FACTOR I - Permissive vs. Authoritarian Orientation to Children

LOADING	ITEM NO.	ITEM CONTENT
.30	2	Demonstrations of affection by teachers are unnecessary because learning is basically an unemotional experience.
.41	53	The best thing a teacher can do for a seclusive retiring child is to make him stand up to life's demands.
.36	58	Let's face it, the teacher usually hasn't the time or the energy to be concerned about children's personal problems *and* about their school achievement.
.48	59	It is relatively unimportant for the child's welfare that teachers should vary assignments and requirements to fit the different abilities of different children.
.35	65	Sympathetic listening by a teacher to a child's personal problems won't usually help the child to better understand his difficulties.
.41	70	The idea that school children can sometimes adequately determine their own aims for learning is nonsense.
.39	71	Students who perform well in class do not need to be complimented since they will be aware of their success.
.55	74	We should leave the students' personal troubles and behavior to the home and the church, and let the school concentrate on training students' minds.

Table 1 (continued)

FACTOR I (continued)

LOADING	ITEM NO.	ITEM CONTENT
.56	79	Many of the school children who seem troubled, anxious, seclusive, or resentful should be made to "measure up" in the regular classroom instead of being given special classes, counseling services, and the like.
.35	80	Clear rules, firmly enforced in the school and classroom, are more effective in maintaining discipline than is reasoning with pupils about their behavior.
.49	82	If a shy, retiring child fails to answer when called upon, the teacher should continue to press him until he attempts to respond.
.35	83	When you get right down to essentials, the teacher is the one person who must always determine just what must be learned and how it is to be learned.
.57	84	The teacher's job is to teach his subject; therefore, he should be relatively unconcerned about the students' emotional reactions and personal troubles.
.56	88	There is little need for the teacher to devise different approaches to teaching a subject to different kinds of children.
.50	92	There's been too much overprotective concern for seclusive, passive pupils; they should be made to "face up" to life in school.
.48	93	A regular, carefully arranged, and unchanging classroom seating pattern promotes effective learning better than does a pattern that permits changes in seating according to the nature of the work in progress.

Table 1 (continued)

FACTOR I (continued)

LOADING	ITEM NO.	ITEM CONTENT
.30	95	Unless you tell school children exactly what to do and how to do it, they tend to become anxious and somewhat tense.
.42	97	If the teacher didn't ignore most of the individual interests and problems of pupils they would often fail to learn what they absolutely should for effective living.
.59	99	Teachers have been lectured too much about taking individual differences into account, when basically, they should deal with all pupils in much the same way.
.58	100	It doesn't much matter if the teacher has lots of information about the child from tests, home visits, and the like, because such information can't really help the teacher to do a better job.
.54	101	There is entirely too much tendency in our society to expect teachers and other school personnel to pay attention to the emotional problems of pupils.
.53	107	If these pupils who have emotional difficulties would just get down to business in school, most of their troubles would clear up.
.50	110	Most school children's emotional difficulties are pretty superficial and insignificant.

Table 1 (continued)

FACTOR II - Sophisticated vs. Naive Management of Child Behavior

LOADING	ITEM NO.	ITEM CONTENT
.38	19	Students who are not well liked by classmates need the teacher's help in learning to "get along" with others.
.42	27	A student may lack the ability to achieve in certain important areas, but, to prevent a severe sense of failure, teachers should discover and encourage him to develop any other talents he may possess.
.32	33	So that students will often experience the reward of success, school assignments should generally be easy at first, but they should be made more difficult as students' knowledge and skill increase.
.39	36	If unpopularity with classmates underlies a child's poor learning in school, his teacher should help him develop ways to "get along" better with others.
.48	44	When many students are inattentive in class, the teacher may need to evaluate and change the teaching procedures being used.
.52	46	If a child appears unable to do the work required of him in the classroom, a careful investigation should be made to find out the reasons.
.31	50	A teacher may help a child to learn better simply by listening sympathetically to his difficulties.
.53	51	A failing student often might improve his performance in a subject, if his teacher could find some way to help him become less anxious, tense, resentful, or defiant.

Table 1 (continued)

FACTOR II (continued)

LOADING	ITEM NO.	ITEM CONTENT
.32	52	Sometimes the teacher can help a troubled child best by enlisting the ideas and continuing assistance of that child's classmates.
.42	57	A pupil's anger and resentment, perhaps growing out of a teacher's failure to listen to the child's reasons for a poor academic performance, may cause that pupil to perform poorly again.
.53	62	It is important to the emotional welfare of the student that he should know his achievement will be judged by reasonable standards.
.32	63	The teacher should see to it that no pupil has to face unreasonable competition in his schoolwork.
.42	66	A student who says he "just hates" a subject, such as reading or math, may really need the teacher's help in order to understand that his "hate" masks his true fear of failure.
.38	67	In order to create a sound environment for learning, the teacher should generally maintain a relaxed and friendly attitude toward students.
.46	69	A really effective teacher finds ways to cause children to learn well without arousing needless tensions and anxiety in them.
.37	72	In order to prevent them from developing more serious problems later on, students who experience emotional difficulties or school learning problems should be quickly referred for help to appropriate specialists, such as counselors, in the school system.

Table 1 (continued)

FACTOR II (continued)

LOADING	ITEM NO.	ITEM CONTENT
.54	73	Every child in the classroom should have clear ideas of what the teacher expects him to do and to accomplish.
.37	75	Any school subject can be taught in an intellectually honest way to almost any child, but different ways of teaching it must be developed for different kinds of children, if they are to learn effectively.
.48	77	To teach a child really well, the teacher needs to know a great deal more about that child's feelings, interests, and talents than can be learned from his tests and examinations.
.35	86	The teacher should see to it that every pupil's work is judged by clear standards.
.46	87	One of the most important things a teacher can do for children is to show a serious concern for their emotional well-being.
.52	90	Generally, the more information one has about a child's abilities, accomplishments, interests, and problems, the better he can be taught in school.
.48	96	Children need to be helped to "feel at ease" in themselves, if they are to learn well in school.
.41	103	Children who tend to be discourteous and rowdy in school often need help to clear up difficult emotional problems.
.43	104	If they expect children to learn well in school, teachers should give them help in understanding their worries, fears, and resentments.

Table 1 (continued)

FACTOR II (continued)

LOADING	ITEM NO.	ITEM CONTENT
.31	105	A teacher who wants to do an effective job must generally allow children's own desires and interests to enter into their learning to a marked degree.
.38	108	Every pupil should be helped to realize clearly that the teacher is concerned about him as a person regardless of how well he behaves and achieves in school.
.46	109	Even though many of a child's problems, fears, worries, and the like might seem unimportant to most adults, the teacher should take them seriously until they are proved to be insignificant.

FACTOR III - **Superficial vs. Informed Mental Health Concepts**

LOADING	ITEM NO.	ITEM CONTENT
-.37	6	Calling on a shy student frequently encourages him to participate.
-.35	9	Praise or criticism should be given to all students according to the same standard, if the teacher is to be respected for fairness.
-.35	11	Students can be motivated to work harder by setting up classroom activities with competition among teams selected by ability levels.
-.44	13	Strong decisive encouragement is all that is necessary to get most shy students to speak up.
-.30	14	Protecting the student with emotional difficulties from situations which remind him of his problems helps to prevent these difficulties from becoming more serious.

Table 1 (continued)

FACTOR III (continued)

LOADING	ITEM NO.	ITEM CONTENT
-.39	21	Students who give glib explanations of their behavior will usually accept the real reasons for it quite readily when the teacher or principal points them out.
-.41	26	An emotionally disturbed pupil is likely to show real improvement, if the classroom teacher gives him advice about what has caused his disturbance and what to do about it.
-.37	30	The teacher's standards of behavior and academic achievement should be maintained for all pupils in the classroom, even if a few children are thereby made resentful or afraid.
-.40	35	If only he can be persuaded that he will do better if he tries harder, a student who seems to lack ability in a certain subject frequently may show a real and lasting improvement in it.
-.37	45	When the teacher carefully organizes and closely controls children's school work the intellectual curiosity and creativity of pupils is likely to increase.
-.36	47	Children differ one from another, but this should not affect the standards on which the teacher criticizes or praises pupil behavior and achievement.
-.33	64	If a student really wants to learn and achieve well in school, he can usually do so by putting forth enough effort and hard work.

Table 1 (continued)

FACTOR IV - Not Interpretable

LOADING	ITEM NO.	ITEM CONTENT
.41	24	A common hazard in teaching is that we often have unrealistic expectations for our pupils.
.33	60	When a student shows a deep interest and knowledge of one subject, he often seems "odd" to other children.
.32	94	Hostility toward his classmates may be a symptom of the child's hostility toward the teacher.

FACTOR V - Direct Efforts to Help Children vs. Ignoring

LOADING	ITEM NO.	ITEM CONTENT
.36	98	If the teacher didn't ignore most of the individual interests and problems of pupils they would often fail to learn what they absolutely should for effective living.
.41	102	When a child tells the teacher about his personal troubles, the teacher should give him clear, specific advice on how to deal with them.
.43	104	If they expect children to learn well in school, teachers should give them help in understanding their worries, fears, and resentments.
.30	105	A teacher who wants to do an effective job must generally allow children's own desires and interests to enter into their learning to a marked degree.
.50	106	If a troubled child tells the teacher of his worries, fears, and resentments, the teacher should try to "dig out" and explain the true reasons for them.

FACTOR VI - No loadings of .30 or higher, hence the factor was dropped from further consideration.

In addition to measuring four positive mental health orientation factors, DOTO also contains a factorially complex scale which was developed by comparing the item responses of a Texas sample (N=205) of elementary school teachers with those of 145 fellows of the American Psychological Association's Divisions of Clinical, Counseling, School, and Developmental Psychology. This scale is scored according to differences (.10 level or greater) between the psychologists and the teachers, and is named APA-Preferred Responses. It will be referred to as Scale V, "APA-Preferred Responses" in all subsequent parts of this report and in Table 2.

Table 2

DOTO Items Constituting the "APA-Preferred Responses" Scale*

DOTO ITEM NO.	ITEM CONTENT
1	In order to promote pupils' learning of self-discipline, a teacher should never lose emotional control nor speak in anger.
6	Calling on a shy student frequently encourages him to participate.
7	A classroom which is very carefully organized around lectures and detailed assignments tends to reduce the students' intellectual curiosity.
9	Praise or criticism should be given to all students according to the same standard, if the teacher is to be respected for fairness.
13	Strong decisive encouragement is all that is necessary to get most shy students to speak up.
14	Protecting the student with emotional difficulties from situations which remind him of his problems helps to prevent these difficulties from becoming more serious.
15	Youngsters in school need to have the limits of situations carefully defined for them, since reasoning with them usually doesn't work very well.
21	Students who give glib explanations of their behavior will usually accept the real reasons for it quite readily when the teacher or principal points them out.
22	A student's time should be scheduled carefully so that there are no periods of the day that are wasted in nonproductive activity.
24	A common hazard in teaching is that we often have unrealistic expectations for our pupils.

Table 2 (continued)

DOTO ITEM NO.	ITEM CONTENT
25	In order to learn self-discipline and develop good work habits, students should be made to complete tasks they do not like.
27	A student may lack the ability to achieve in certain importent areas, but, to prevent a severe sense of failure, teachers should discover and encourage him to develop any other talents he may possess.
33	So that students will often experience the reward of success, school assignments should generally be easy at first, but they should be made more difficult as students' knowledge and skill increases.
34	A class is more easily controlled if seats are arranged in a regular pattern and each student is assigned a specific seat.
35	If only he can be persuaded that he will do better if he tries harder, a student who seems to lack ability in a certain subject frequently may show a real and lasting improvement in it.
38	If a student's "nervous tension" arises from fearing the consequences of his actions, it can be reduced by preventing his engaging in wrong actions.
39	Most students respond best to a teacher who defines very firm limits and enforces them fairly.
43	Spending classroom time helping students with their everyday problems and their emotional difficulties prevents the teacher from dealing sufficiently with necessary subject matter.
54	Preventing a problem student from doing something he knows is wrong before he actually does it will lessen his nervous tension, because his fears of the consequences of his acts are lessened.

Table 2 (continued)

DOTO ITEM NO.	ITEM CONTENT
55	A thoroughly orderly, carefully organized, classroom environment gives children a great sense of security.
56	Students who achieve successfully in school are nearly always comfortable with themselves and others.
67	In order to create a sound environment for learning, the teacher should generally maintain a relaxed and friendly attitude toward students.
76	The student who relies on the more mature judgment of teachers and parents about how much time he should spend in study, and who seeks frequent direction about how to study most effectively will achieve greater academic success than one who does not.
81	Most underachievement is caused by laziness on the part of the student.
89	The student who concentrates instantly on one subject is in danger of becoming too narrow in outlook.

*Items numbered 6, 14, 24, 43, and 67 are scored from "5" (the Agree extreme) to "1" (the Disagree extreme), while all other items are scored in the opposite direction.

A further point to be considered in relation to the factor analytic validity of DOTO has to do with how well the four factors found in the Minnesota population matched factors found by identically performed image analyses made of the responses in the Spring of 1964 by the teachers in the schools of the two Texas communities in which the consultation experiment was conducted by University of Texas personnel. Tables 3 and 4 show the cosines among factor axes for pairs of factor matrices compared or matched. These cosines, according to Veldman (1967) may be interpreted as correlation coefficients.

Table 3

Cosines of Factor Axes (Invariance Coefficients) Comparing Minnesota Factors With DOTO Factors for Teachers in Texas Community A

Factors Minnesota Teachers	Community A Factors						
	1	2	3	4	5	6	7
1		.96					
2	.88						
3				.95			
4							.89
5			-.83				
6						-.84	

Table 4

Cosines of Factor Axes (Invariance Coefficients) Comparing Minnesota Factors with DOTO Factors for Teachers in Texas Community B

Factors Minnesota Teachers	Community B Factors					
	1	2	3	4	5	6
1				.85		
2	.73					
3		-.82				
4			-.77			
5					-.51	
6						.63

Examination of Tables 3 and 4 shows that, in general, the DOTO factors found in the Minnesota sample of elementary school teachers were also found comparably for the teachers in the two Texas communities where the consultation experiment was conducted. Cosines larger than ± .70, without regard to sign, indicate at least some correspondence between factor vectors. In Tables 3 and 4, ten of these values do exceed ± .70. It can be considered with some assurance, then, that the statistical factors identified for the Minnesota population possess some common character from one community to another.

If the four DOTO scales and Scale V, "APA-Preferred Responses" with items weighted from "1" (Agree rather strongly) to "5" (Disagree rather strongly), it is practicable to ask about the extent of their intercorrelations and about their reliability in the sense of internal consistency. This has been done for the four DOTO factor scales described above. The results are shown in Table 5. Overall, these results indicate that scale reliabilities are satisfactorily high and scale intercorrelations reasonably low. The same is true of the APA-Preferred Responses scale.

Table 5

Reliabilities* and Intercorrelations For Four DOTO Factor-Based Scales and APA-Preferred Responses Scale (N = 1344)

Scale	1	2	3	4	5
1. Permissive _vs._ Authoritarian Orientation toward Children	.88	.60	.43	.17	.42
2. Sophisticated _vs._ Naive Management of Child Behavior		.91	.00	-.05	.56
3. Superficial _vs._ Informed Concepts of Mental Health			.75	.28	.30
4. Direct Efforts to Help Children _vs._ Ignoring				.57	.41
5. APA-Preferred Responses					.76

*Spearman-Brown split-half reliabilities appear in diagonal.

Consultation Report Form (CRF)

Not all of the salient criterion (or "output") changes in, and variations among, elementary school personnel have been deemed to be appropriately assessed by means of DOTO - a self-report procedure. Indeed, it was considered likely that certain features of consultation could most profitably be appraised through the Child Behavior Consultants' ratings, after each consultation session, of characteristics (a) of the consultee, (b) of the consultee's relationship with and concern for his child "client," and (c) of the varied qualities of the CBC-consultee interaction.

A Consultation Report Form (CRF), intended to elicit each Consultant's ratings of many variables descriptive of the detailed character of each consultation session, was developed. A copy is included in the Appendix. Insofar as possible, the CBC's learned through lengthy training meetings, which were intended to produce consensus on the meanings of constructs and the rating scale intervals, to rate consultation sessions along essentially the same construct variables. Of the total number of items on the CRF, 44 rating scales or frequency reports have been selected for examination here. Except for obvious items, such as a pupil's grade in school, each selected item required a 9-point rating to be made of the degree of some named characteristic observable within a given consultation session, *e.g.*, overt hostility. The specific variables rated may be ascertained by examining Table 6.

All possible inter-scale correlation coefficients among the 44 item rating scales selected were computed by the product-moment method, both for a total of 487 consultations and for each Consultant's own sessions taken by themselves. These correlation matrices were then subjected to factor extraction by the principal axis method. Those extracted factors having eigenvalues of 1.00 or higher were subsequently rotated to orthogonality by means of Kaiser's (1958) varimax method. The final rotated factor matrices were then examined in order to identify and describe the factors obtained for individual CBC's, as well as those obtained for the pool of 487 consultations assessed on the CRF by all five Consultants pooled together. It should be noted that, although a total of 703 separate consultations had, at the time, been conducted and rated, it was deemed desirable to adjust this pool so as to include an approximately equal contribution of rated sessions from each of the five consultants. Therefore, by a process of random exclusion, the 321 rated consultations contributed by one CBC were reduced to 105. The numbers of consultations contributed by the other CBC's and used in the present study were 113, 83, 85, and 101, respectively, with the total pool analyzed being, then, 487.

Next, the six separate factor matrices, obtained as just described, were compared empirically by the cosines of vectors factor-matching method. This technique yields "invariance coefficients," which are the cosines of the angles of the vectors, such that values of ± .90 or higher, without regard to sign, imply correspondence approaching identity between a given pair of factors, one from each of two factors matrices being compared. Those factors which yielded invariance coefficients of ± .85 or higher were considered to be virtually matching factors in this research, but no test of statistical significance is available for factor matching cosines.

These procedures were employed to test the propositions that (a) certain statistical dimensions occurred in each Consultant's appraisals of his consultations; (b) that such dimensions could be identified and measured as statistical factors; and (c) that relatively similar (or common) sets of constructs were employed by the five CBC's in assessing the detailed character of their consultation sessions.

An additional set of factor analyses and factor matching studies were performed. Just as each Consultant's own factors were compared, in factor matching studies, with the factors found for the total of 487 CBC-rated consultations, so each Consultant's contribution to the total of 487 was deleted, and his factors were then compared with those found for a reduced factor matrix based on the ratings made by the other four CBC's. Thus, for example, the factors for CBC No. 1 were compared with those found for a second matrix obtained by analyzing the ratings contributed by CBC's 2, 3, 4, and 5 only.

Factor analyses of 44 rating scales were made for (A) all 703 consultations and for (B) the reduced pool of 487 consultations. These analyses yielded two factor matrices, each of which accounted for approximately 60 per cent of the total common variance in terms of 12 factors. Of the 12 factors found in each analysis, 11 proved to be virtually identical when tested by Kaiser's (1958) factor matching method. The factors are shown by number and by name in Table 6. From the invariance coefficients reported with the factor numbers in Table 6, it will be seen that the best correspondence between Factor XII for all 703 consultations was with Factor XI for the reduced pool of 487 consultations. In this instance, the invariance coefficient of .79 is relatively low. The factor loadings reported in Table 6 are those which were found for all 703 consultation sessions; only those rating scales which loaded a factor to the extent of ± .40 have been reported, however.

Table 6

Principal Axis (Varimax Rotated) Orthogonal Factors Measured by Consultation Report Form (A) for All 703 and for (B) 467 Consultations Conducted by 5 CBC's--with Invariance Coefficients (I)

Factor Numbers	Names of Factors and Percentage of Variance	Factor Loadings*	CRF Scale Number	Consultation Characteristic Rated
A: I	Consultee Defensiveness			
B: II	vs. Rapport with CBC			
I = 1.00**	(A = 10.2% Variance; B = 3.0% Variance)			
		.78	40	Rapport: CBC with C'ee
		.73	30	Receptive Attitude by Consultee
		.71	68	Rapport (2nd Rating)
		-.70	27	Consultee Covert Hostility to CBC
		-.67	26	Consultee Overt Hostility to CBC
		-.65	29	Consultee Defensiveness toward CBC
		.59	71	CBC Belief Appointment will be Kept

Table 6 (continued)

Factor Numbers	Names of Factors and Percentages of Variance	Factor Loadings*	CRF Scale Number	Consultation Characteristic Rated
A: II	Consultee in Crisis, or			
B: III	Consultee Involvement			
I = -.99	(A = 6.6% Variance; B = 6.6% Variance)			
		-.80	48	Consultee Defensiveness toward Client
		.68	31	Emotional Arousal of Consultee
		-.67	45	Consultee Attitude to Client--Involved to Uncommitted
		-.61	28	C'ee Attitude to CBC--Dependent vs. Independent
		-.42	57	C'ee Confidence to Cope with Problem of Client

Table 6 (continued)

Factor Numbers	Names of Factors and Percentages of Variance	Factor Loadings*	CRF Scale Number	Consultation Characteristic Rated
A: III	Dumping of Client Syndrome			
B: I				
I = -.95	(A = 9.3% Variance; B = 9.3% Variance)	-.78	50	C'ee Attitude to Client--Rejecting vs. Receptive
		.72	46	C'ee Overt Hostility to Client
		.71	49	C'ee Covert Hostility to Client
		.69	47	C'ee Defensive toward Client
		.67	52	C'ee "Dumping Syndrome"
		-.65	51	C'ee Tolerates Client in Emerg.
		-.58	44	C'ee Fixed vs. Adaptive to Client
		-.49	42	C'ee Coercive vs. Adaptive to Client
		-.41	57	C'ee Confidence Coping with Client

Table 6 (continued)

Factor Numbers	Names of Factors and Percentages of Variance	Factor Loadings*	CRF Scale Number	Consultation Characteristic Rated
A: IV B: V I = .99	Age-Grade of Client Child (A = 4.7% Variance; B = 4.6% Variance)			
		.93	9	Client's School Grade
		.92	10	Client's Chronological Age
A: V B: IV I = .95	Consultee's Formal Efforts to Help the Child (A = 5.1% Variance; B = 5.7% Variance)			
		.69	35	C'ee Use of Records re Client
		.68	36	C'ee Use of Available Resources
		.54	25	C'ee Introduces Admin've Material
		.43	37	C'ee Familiarity with Similar Problems of Client's

Table 6 (continued)

Factor Numbers	Names of Factors and Percentages of Variance	Factor Loadings*	CRF Scale Number	Consultation Characteristic Rated
A: VI	Consultee's Receptiveness			
B: VIII	for CBC's Message			
I = -.98	(A = 5.1% Variance; B = 5.1% Variance)			
		.82	66	C'ee Reception Prime Message
		.68	67	C'ee Acceptance Prime Message
		.63	61	CBC's Judgment Message Clarity
		.48	55	Appropriateness C'ee Concern
A: VII	CBC's Self-Confidence			
B: VII				
I = .96	(A = 4.2% Variance; B = 4.4% Variance)			
		.77	54	Problem Recog.: CBC Certainty
		.77	59	Theme Assessment: CBC Certainty
		.42	61	Message Clarity: CBC Rating

Table 6 (continued)

Factor Numbers	Names of Factors and Percentages of Variance	Factor Loadings*	CRF Scale Number	Consultation Characteristic Rated
A: VIII	Severity Client Disorder			
B: IX				
I = .92	(A = 4.4% Variance; B = 4.3% Variance)			
		-.74	33	Client's Symptom Duration
		-.69	41	Rated Severity Emot'l Disorder (Bower Scale)
A: IX	Directiveness--C'ee			
B: VI	Approach to Clients			
I = .96	(A = 4.1% Variance; B = 4.7% Variance)			
		.73	43	Directive vs. Non-Dir. App.
		.65	42	Coercive vs. Permissive App.
		.47	12	Size Client's Family Grp.

Table 6 (continued)

Factor Numbers	Names of Factors and Percentages of Variance	Factor Loadings*	CRF Scale Number	Consultation Characteristic Rated
A: X	*Early, Longer vs. Later,*			
B: X	*Shorter Consultation*			
I = -.99	(A = 3.9% Variance; B = 4.3% Variance)			
		.55	20	Length of Session (Min's)
		-.69	3	Visit No. re this Client
		-.66	4	Visit No. with Consultee
A: XI	*Telephone Consulting*			
B: XII				
I = .99	(A = 2.5% Variance; B = 2.5% Variance)			
		.92	23	No. Phone Calls to CBC

Table 6 (continued)

Factor Numbers	Names of Factors and Percentages of Variance	Factor Loadings*	CRF Scale Number	Consultation Characteristic Rated
A: XII	Consultee Concern re			
B: XI	Client's Welfare			
I = .79	(A = 2.7% Variance; B = 4.8% Variance)			
		.68	38	C'ee Press on CBC to See Client
		-.40	56	C'ee Irresponsibility vs. Responsibility Taking
		-.40	55	C'ee Approp. vs. Inappropriate Concern for Client

*Factor loadings less than .40 omitted from table

**Invariance coefficients--cosines of vectors method--measuring similarity of factors obtained for (A) 703 and (B) 487 consultations by 5 CBC's

The factor-variables identified by the present analyses of CBC's ratings of their consultations appear, from the patterns of scales and the factor loadings and signs which defined them, to be appropriately named as follows:

Factor I. Consultee-CBC Rapport (*vs.* Defensive Hostility)
II. Consultee Crisis (*or* Consultee Involvement)
III. Dumping (of Client) Syndrome
IV. Age-Grade of Consultee's Client
V. Consultee's Formal Helping of Client
VI. Consultee's Receptiveness for CBC's Message
VII. CBC's Self-Confidence
VIII. Seriousness and Chronicity of Client's Disorder
IX. Directiveness of Consultee's Approach to Clients
X. Early, Longer *vs.* Later, Shorter Consultations
XI. Telephone Consultation Frequency
XII. Consultee Concern for Client's Welfare

Separate factor analyses made for ratings of sessions held by five individual CBC's each produced matrices of either 12 or 13 factors. These five factor matrices are not reported here, since the key question to be answered did not have to do with determining each consultant's factor-constructs. Instead, the key issue was to determine whether or not each CBC's factors agreed with those of the others taken together. In addition, of course, it was considered desirable to determine the extent to which each CBC used construct-factors which corresponded with the construct-factor found for each of the other CBC's taken individually. Table 7 shows the invariance coefficients of ± .80 or more (cosines of factor vectors) which occurred when factor matrices for each CBC were matched with the factors found for all 487 consultations less that CBC's own consultations. The balanced pool of 487 consultations conducted by all CBC's was, of course, reduced by an individual CBC's consultations when he was compared with the others in order to delete his specific contribution to the total. Table 8 briefly summarizes the results of factor matching studies in which individual Consultants were pitted against one another.

Table 7

Results of Factor Matching Studies: Factor Matrix For 487 Consultations Compared With Successive Factor Matrices Reduced By CBC Indicated

Factors for 487 Rated Consultations		Invariance Coefficients: *487 less N** for Child Behavior Consultant				
No.	Assigned Name	No. 1	No. 2	No. 3	No. 4	No. 5
I.	Consultee-CBC Rapport	---	.997	.980	.990	.910
II.	Consultee Crisis	-.960	-.990	-.980	-.980	.990
III.	Dumping (of Client) Syndrome	-.980	-.990	-.970	---	-.870
IV.	Age-Grade of Client	.950	.970	1.000	.900	.970
V.	Consultee's Formal Helping of Client	.920	.998	.997	.960	.996
VI.	Consultee's Receptiveness for CBC's Message	---	.995	-.980	-.990	.800
VII.	CBC's Self-Confidence	.930	.980	.990	.850	.940
VIII.	Seriousness: Client Disorder	-.970	.980	-.990	-.990	-.970
IX.	Directiveness of Consultee	---	.992	.980	---	.870
X.	Time & Duration: Sessions	-.920	---	-.960	.970	.990
XI.	Telephone Consulting	---	---	.920	.980	---
XII.	Consultee Concern for Client	.990	---	.970	---	.840

*Invariance coefficients of less than .800 omitted from table.

**N's as follows: CBC No. 1 (113); CBC No. 2 (83); CBC No. 3 (85); CBC No. 4 (101); CBC No. 5 (105).

Table 8

Factor Matching Studies: Individual CBC's Factor Matrices Compared With Those of Other CBC's Individually

Code No's. of CBC's Compared	Number of Matching Factors
CBC No. 1 *vs.* CBC No. 2	6
No. 1 *vs.* No. 3	9
No. 1 *vs.* No. 4	7
No. 1 *vs.* No. 5	9
CBC No. 2 *vs.* CBC No. 3	5
No. 2 *vs.* No. 4	6
No. 2 *vs.* No. 5	5
CBC No. 3 *vs.* CBC No. 4	6
No. 3 *vs.* No. 5	8
CBC No. 4 *vs.* CBC No. 5	5

Table 6 presented the factor dimensions identified for the pooled ratings, both for all 703 consultations conducted by five CBC's and for a pool of 487 consultations in which the number of consultations contributed by each CBC was relatively fairly balanced. An examination of these factors showed them to be virtually identical, whether derived for 703 or for 487 consultations. Only one factor, "Consultee Concern for Client's Welfare," obtained for the 703 consultations was not identically matched by a factor obtained for the 487 consultations. Of the factors so identified and shown in Table 6, five appear to be descriptive of the relationship between CBC's and their consultees, i.e., Factors I (Consultee-CBC Rapport), VI (Consultee's Receptiveness), VII (CBC's Self-Confidence), X (Duration of Consultations), and XI (Frequency of Telephone Consultations). Four factors appear to describe the consultee's involvement with, commitment to, or concern for his client's welfare, these being Factors II (Consultee Crisis), Factor III (Dumping Syndrome), and Factor XII (Consultee Concern for Client) and VIII (Severity of Client's Disorder). Two other factors seem related to the consultee's way or style of trying to help his clients; Factor V apparently measures the relative formality of helping behaviors, while Factor IX marks differences in directiveness vs. permissiveness. Several of the factors which we have been able to identify in our CBC's ratings are, we think, important indicators of consultees' propensities for working in ways productive of adaptive competence in children.

Although at least 11 of the 12 primary factors obtained by analyzing selected scale items of the CRF appeared to be meaningfully interpretable, it was considered probable that more reliable factors would emerge from a second-order factor analysis. Therefore, the CRF scales loading each of 11 primary or first-order factors (all except "Telephone Consulting") were summed as 11 separate "factor item dimensions" (FID's) and intercorrelated by the product-moment method. The resulting matrix of intercorrelations was factored by the principal components method and rotated to orthogonality by the normal varimax technique. This analysis produced the three relatively clearly defined second-order factors shown in Table 9.

Table 9

Second-Order Factor Matrix for the Consultation Report Form

First-Order Factor Scales	Loadings on Second-Order Factors I	II	III
1. Consultee-CBC Rapport	.14	.80	-.27
2. Consultee Involvement With Client	.75	.41	-.21
3. Dumping (of client) Syndrome	-.84	.15	-.17
4. Age - Grade of Consultee's Client	.37	.06	-.63
5. Consultee's Formal Helping of Client	.53	.22	-.50
6. Consultee Receptiveness for CBC's Message	.17	.92	-.14
7. CBC's Self-Confidence	.27	.85	-.11
8. Seriousness of Client's Disorder	.48	.24	-.63
9. Directiveness of Consultee's Approach to Clients	.39	.33	-.55
10. Early, Longer vs. Later, Shorter Consultations	.12	-.10	.73
11. Consultee's Concern for Client's Welfare	.78	.13	-.05
PERCENT VARIANCE	25.6	24.1	18.6

The second-order CRF factors appear to be somewhat appropriately named as follows and to implicate the first-order CRF factors shown with these names.

Second-Order Factor I:

"Consultee's Concern and Helping vs. Non-Involvement with Child Client"

Factor Scale II: Consultee Involvement with Client
Factor Scale III: Dumping (of client) Syndrome
Factor Scale V: Consultee's Formal Helping of Child Client
Factor Scale XII: Consultee's Concern for Client's Welfare

Second-Order Factor II:

"Consultee's Rapport with and Receptiveness to Consultant"

Factor Scale I: Consultee-CBC Rapport
Factor Scale VI: Consultee Receptiveness for CBC Message
Factor Scale VII: Consultant's Self-Confidence

Second-Order Factor III:

"Consultee's Relationship with Client and Judgment of Client's Disorder"

Factor Scale IV: Age-Grade of Consultee's Client
Factor Scale VIII: Seriousness and Chronicity of Client's Disorder
Factor Scale IX: Directiveness of Consultee toward Client
Factor Scale X: Early, Longer vs. Later, Shorter Consultations

Reliability of CRF Ratings. Some estimate of the inter-rater reliability of the Consultation Report Form was deemed to be desirable. Ideally, perhaps, this estimate should have been made on factor-based CRF scales - either the primary factors or the three second-order factors - but, because CBC's were not always able to rate each session on each scale of the CRF, the approach in terms of factor scales could not be taken. Instead, 39 rating scales of the CRF[1] were selected as a pool from which as large a number as possible could be compared across raters by means of product-moment correlations. During 1965-1966 one experienced CBC was employed to observe other CBC's consultation sessions and to prepare an independent CRF on each. In this way the "reliability checking CBC" prepared 10 CRF's to compare with CBC "A", 5 CRF's to compare with CBC "B", and 5 CRF's to compare with CBC "C". The reliability results (correlations) obtained for these 23 consultations showed a range from .42-.90 with a median inter-rater $r = .66$. While not impressively high, this degree of inter-rater reliability seems, on the average, to be minimally satisfactory. To the extent that all CRF protocols submitted by the CBC's fall within the range of reliability found experimentally, we can expect that CBC-rater reliability was probably greater than zero.

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[1] CRF scale items numbered 20, 26-33, 35, 37-57, 59-62, 64, 66, 71, and 72.

Summary

This Chapter has presented an account of the development of criterion instruments intended to reveal predictable changes and variations in the orientations of elementary school personnel (as consultees) toward young children. One device, Dimensions of Teachers' Opinions (DOTO) is a multifactor self-report inventory of relatively satisfactory reliability. It is considered to measure the following construct variables:

1. Permissive vs. Authoritarian Orientation to Children
2. Sophisticated vs. Naive Management of Child Behavior
3. Superficial vs. Informed Mental Health Concepts
4. Direct Efforts to Help Children vs. Ignoring
5. APA-Preferred Responses

In order to take advantage of Consultants' judgments of the detailed character of individual consultation sessions, a Consultation Report Form (CRF) consisting of items to be reported on as ratings or in other ways was devised. Factor analyses and factor matching studies of selected CRF items have revealed that Child Behavior Consultants in this Project apparently held similar conceptions basic to their ratings. Their individual factor matrices matched one another quite well for fairly large numbers of consultations. Eleven first-order CRF factors, found in over 700 CRF protocols, were scored as individual factor scales, intercorrelated, and subjected to principal axis factor extraction and varimax rotation. This procedure yielded three second-order CRF factors which were provisionally named:

1. Consultee's Concern and Helping vs. Non-Involvement with Child Client
2. Consultee's Rapport with and Receptiveness to Consultant
3. Consultee's Relationship with Client and Judgment of Client's Disorder.

It should be remembered, of course, that the names ascribed to DOTO or CRF factors can only crudely describe the content of these factors. They should be understood, generally, as collective labels for the items they subsume. Nonetheless, in the development of criterion and predictor scales in a demonstration and investigative endeavor such as the present one, few alternatives to factor analysis readily present themselves.

CHAPTER V

INSTRUMENT DEVELOPMENT: MEASURING INDEPENDENT AND MODERATOR VARIABLES

The previous Chapter described the measurement of factors which were to be considered as the chief criterion or dependent measures of teacher change in the present study. This Chapter outlines the measurement of other variables in the investigation--variables which it was hypothesized would show differences, or be predictably associated, with changes (hopefully consultation-produced) in the dependent or criterion variables.

It will be recalled from Chapter II that the present demonstration and research effort has centered about a paradigm which proposed that criterial ("output") changes in school people, where their orientations toward facilitating the mental health of children are concerned, are associated with other factors including the degree of usage of consultation, readiness, role definitions, personal histories (e.g., training, age, family background, etc.), perception of the school milieu, etc. In the present work the degree of utilization of consultation is viewed as the major independent variable upon which criterial change should hinge. Most other variables measured in the project could best be viewed as intervening or moderating variables when considered in terms of the controlling paradigm.

Degree of Utilization of Consultation

The most direct way, experimentally, to assure and to measure variation in the utilization of consultation services is to provide them to some schools and to withold them from comparable schools. This we have done by assigning certain schools in the Austin and North East San Antonio (Texas) School Districts to the "demonstration" (or experimental) and "comparison" (or control) categories, respectively. Such assignment was not made randomly, but, in consultation with the Superintendents of Schools, was made with the intention of assuring initially comparable sets of demonstration and comparison schools in each community. Findings to be reported in a later chapter do indicate that the personnel of demonstration and comparison sets of schools were not significantly different in DOTO-measured characteristics at the time of initiating the consultation service.

While providing consultation services to some schools and not to others does assure that there will be differences in the degree, or extent, of utilization of consultation across sets of schools, it does not take account of the obvious fact that, within the set of demonstration (or experimental) schools, there is bound to be wide variation among individual staff members in their use of Child Behavior Consultants. In other words, it is clear, the amount of consultation surely varied, not only from school to school, but from individual to individual within schools.

In measuring the latter sort of variation, we could have developed a number of different strategies. For instance we might have had each Child Behavior Consultant report the duration of each consultation session on the CRF. Instead, we settled for a naming of each consultee at each session so that the frequency of his use of consultation could later be ascertained.

Intervening or Moderating Variables

The paradigm which has given general direction to the present project in child behavior consultation suggests that the consultation service should produce different degrees of change in school personnel depending on certain characteristics of consultees including their perception of the school-community milieu in which they function. We have therefore given considerable attention to developing devices intended to measure various classes of these variables which are hypothesized to be related to teacher change occurring in association with consultation usage.

Readiness Factors

We have held, from the beginning of this project, that school people differ in their "readiness" to change as a result of utilizing the services of Child Behavior Consultants. Alternatively stated, this hypothesis predicts that elementary school personnel who change to the greatest extent in such factors as are presumably measured by DOTO (described in the previous Chapter) should also differ in measures of readiness. What is meant by readiness in the present context requires some definition, of course. The construct is certainly a complex one having many facets. At one level of thinking we might suppose that readiness may include many factors in an individual's autobiographical background--e.g., the amount of training the teacher has acquired. Again, the individual consultee's conception of what constitutes an "ideal pattern" of child behavior may be construed as an aspect of readiness. Then, too, the tendency to be irritated by, or sensitive too, certain child behaviors, rather than to be insensitive to them, is probably another facet of readiness to change with consultation.

Such ideas as those just outlined have guided our efforts to develop measures of readiness factors. Thus, we have assumed that some aspects of readiness are parts of the individual's life history while others, we think, are relatively stable attributes of an individual's attitudes. In consequence, the devices which we have invented and used with school people are intended to yield measures of readiness at these varying levels.

Autobiographical Data Form. This is an objectively answerable device (see Appendix) designed to survey, in 77 items various facets of the potential consultee's life history and present circumstances. The form covers, for example, childhood family relationships; items of social-economic importance; school experiences; academic performance;

religious affiliation, activities, and attitudes; models for identification; health problems; and other matters.

Needs for Assistance Inventory. A relatively simplistic view of things would suggest that one ingredient of readiness for consultation and for change would consist of admitted needs for assistance in coping with one or more classes of child behavior problems likely to be encountered in the school setting. Our Needs for Assistance Inventory (see Appendix) has been devised in an effort to identify classes of child behavior problems which school people reportedly need help in managing and to measure the strength or intensity of the need for help with each class of problems.

In building the Needs for Assistance Inventory an effort was made to include items that would measure individual differences among school personnel in expressed needs for help with eight separate classes of school and child problems, as follows:

1. Rebellious Behavior
2. Somatic Complaints of Children
3. Immaturity and Withdrawal Behavior
4. Shyness
5. Managing Instruction
6. Managing Classroom Discipline
7. Nervous Hyperactivity of Children
8. Symptoms of Social Ill-Ease in Children

The items for the Needs for Assistance Inventory were selected from those written by experienced teachers and counselors in response to a request by project personnel to "list as many kinds of child behavior as you can with which teachers need help to deal effectively." The final forms of the items are illustrated by the following:

> Item No. 2. A child appears flushed after coming in from recess on a warm day.
>
> Item No. 17. Mabel, usually an energetic child, has been lethargic lately, but has not complained of being ill.

Each item of the 50 items in the Needs for Assistance Inventory was responded to by subjects on a relative frequency scale ranging from 1 (Would seek assistance every time) to 5 (Would seek assistance never). All items were responded to on the assumption that they represented problems arising in classroom relationships with children.

For 598 teacher respondents in northeastern Minnesota elementary schools, only two factors were found by image factor analyses (varimax rotation) of the items in the Needs for Assistance Inventory. These factors and the items defining them are shown in Table 10, and have been named as follows:

Factor I. Need for Help with Behavioral and Learning Problems
Factor II. Need for Help with Psychosomatic Difficulties

Table 10

Factors Identified in Needs for Assistance Inventory

for 598 Minnesota Subjects

FACTOR I - Behavioral and Learning Problems

LOADING	ITEM NO.	ITEM CONTENT
.36	4	One of the boys in class shoots a spit-wad at one of the others.
.31	16	A fifth grade child continally writes you love notes and talks about marrying you.
.45	19	The whole class left the room when the bell rang, but before you dismissed them.
.48	21	When George cannot have his way, he does not object but becomes very tense and red in the face.
.56	25	There are several students in your class who seem very hesitant to speak and any class discussion soon turns into a lecture.
.57	26	A clique of girls in the fourth grade has ostracized Ann, and she has no other friends.
.57	28	Herman transferred into your class in the middle of the semester and has had difficulty making friends.
.66	29	Ann, a bright but seemingly lazy student, comments loudly after an assignment has been made, "What happens if we don't do it?"
.58	34	You find the entire class out of their seats when you return to the room after taking a report to the office.

Table 10 (continued)

FACTOR I (continued)

LOADING	ITEM NO.	ITEM CONTENT
.55	35	This year's class, though average in ability, does not seem to be able to grasp rudimentary grammar.
.55	36	Don, who is in the fourth grade, appears overly concerned with grades and becomes quite depressed when he does not get the highest mark in the class.
.47	38	Andrea takes no interest in her school work but spends all her time reading and drawing pictures.
.55	39	Last week, Ralph, who is in the sixth grade, was made to scrub the wall where he had marked it with a pencil; today you find him writing on his desk.
.51	41	Rick is constantly being picked on by the other boys but seems too frightened to stand up and fight back.
.60	44	A little girl uses some swear words out loud in front of the class.
.63	45	It is obvious that several children in the class lack the proper backgound to move on with the lesson plan you have prepared, however the rest of the class is eager to progress.
.69	49	Brett always "drags his feet" and mutters under his breath when asked to do anything.
.71	50	Bill is interested in science and says English is sissy, dampening the enthusiasm of the class for their first experience with poetry.

Table 10 (continued)

FACTOR II - Somatic Difficulties

LOADING	ITEM NO.	ITEM CONTENT
.55	7	Bill seems unable to see the blackboard from the back of the back of the room, so you have moved him to the front, but he still has trouble.
.47	12	You believe that a sixth grade boy who has been absent is claiming sickness falsely.
.54	17	Mabel, usually an energetic child, has been lethargic lately but has not complained of being ill.
.53	18	A third grade boy has come to class extremely upset several times and you have heard that his homelife is quite disruptive.
.35	22	Bobbie has been exposed to an infectious disease; she shows no signs of illness and does not want to miss school.
.52	27	Ralph often complains of stomach pains and asks to be excused from strenuous activity, although his parents have noted no health problems on his record.
.60	31	Posey, who is eight seems mature for her age in most ways yet continues to talk in a lisping "baby talk."
.63	32	A first grade child has been sent home repeatedly after vomiting spells but always comes back the next day.
.50	33	A fifth grade girl in your class will not sit like a young lady; even after you have talked to her privately, she continues to expose herself unduly.

Table 10 (continued)

FACTOR II (continued)

LOADING	ITEM NO.	ITEM CONTENT
.67	37	Billy is a thin, very pale, and listless child who brings a very scanty lunch to school each day.
.50	40	An interesting unit you are teaching would be enriched by supplementary materials to which you have no immediate access.
.66	42	Larry always seems to have very noticeable sores and bruises on his arms and legs.
.55	43	Alex has an abnormal and morbid fascination with guns and knives, refuses to join other children in sports, and prefers to play war games alone.
.53	46	Gwen is sensitive about a birthmark on her face, refuses to join the other children in any games, and always seems to be trying to hide.
.51	47	Karen explains that she constantly has rashes on her hands and arms because she is "allergic" to so many things.
.54	48	Tom asks to be excused to go to the restroom continually; the other boys have told you that he washes his hands over and over and avoids the other boys for fear of picking up germs.

The same factors as are shown in Table 10 for the Needs for Assistance Inventory were found also for the personnel of the two Texas school systems used in this project. This is shown by the high cosines of factor vectors when the factor matrices for Minnesota teachers were compared with the matrices for the teachers in the two Texas project communities as shown in Table 11.

Table 11

Cosines of Factor Vectors (Invariance Coefficients)
Comparing Needs for Assistance Factor Matrices
for Minnesota and Texas Teachers

Minnesota Factors	Texas Community A Factors		Texas Community B Factors	
	I	II	I	II
I	.99	.08	.99	.15
II	-.09	.97	-.13	.88

The items loading the two verified Needs for Assistance Inventory factors when scored as scales, i.e., scored without regard to factor loadings, showed, for the pooled Minnesota and Texas teachers, split-half Spearman-Brown reliability coefficients of .92 and .87 for the two scales. The two scales showed a modest intercorrelation of .42. The mean for Scale I was 65.4 (σ = 12.9) and for Scale II was 33.5 (σ = 10.4).

Behavior Classification Check List (BCCL). Manifest needs for help in working with various kinds of child behavior difficulties may represent one facet of the "readiness" of a school person to utilize and benefit from consultation services, but there are surely other facets. One of these may be thought of as the teacher's sensivity to, or tendency to be "irritated by", some kinds of behavior more than others. The Behavior Classification Check List (see Appendix) has been devised to get at this side of readiness for consultation and for consultation-produced change in DOTO-measured aspects of preventive mental health orientations toward children. Some 92 behavioral items (e.g., "Cheats on tests"; "Passes dirty pictures"; "Doesn't participate"; "Fights"; *et al.*) are presented to a teacher who is asked to respond to each one on a 5-point scale whose polar response alternatives are "Highly Irritating" and "Not at all Irritating", respectively. These 92 items were originally selected by the research staff to represent such classes of behavior as orderliness, physical-verbal aggression, non-conformity, resistance or negativism, withdrawal behavior, and the like. However, an image-type factor analysis of the item intercorrelations for 669 Minnesota elementary school teachers adduced evidence for only three interpretable factors and two uninterpretable factors among the items. These are shown in Table 12.

Table 12

Factors Identified in Behavior Classification Check List

for 669 Minnesota Subjects

FACTOR I - Vulgar, Aggressive, Non-Conformity

LOADING	ITEM NO.	ITEM CONTENT
.42	1	Is always tapping foot or drumming fingers.
.41	19	Wiggles and squirms during lecture.
.35	25	Refuses to conform to ceremonials--flag salute, devotional, etc.
.46	29	Lacks cleanliness--"this kid needs a bath."
.61	34	Violates class rules.
.60	35	Writes on desk.
.44	44	Flips coins in classroom before class starts.
.59	46	Jumps from one activity to next, does not finish tasks.
.49	48	Girls and boys tickling each other.
.44	50	Doesn't take advantage of opportunity when teacher comes before school or stays late to give individual help.
.50	51	Doesn't participate.
.45	52	Reads library books when assignment is not done.
.55	56	Lies.
.70	62	Is destructive with school property.

Table 12 (continued)

FACTOR I (continued)

LOADING	ITEM NO.	ITEM CONTENT
.53	66	Plays kissing games.
.58	67	Never shows enthusiasm for school work.
.74	69	Marks on the walls with pencil.
.57	73	Interprets things in suggestive manner.
.51	75	Asks to do assignment differently than given.
.60	76	Sticks gum on desks.
.66	85	Writes "dirty things".
.53	86	Erases board when it says "save".
.64	87	Creates unnecessary noise (drops books, shuffles feet).
.72	90	Draws "dirty" pictures.
.56	91	Does not take orders when other children are in charge.

FACTOR II - Dependent Ingratiating Behavior

LOADING	ITEM NO.	ITEM CONTENT
.42	4	Complains "Nobody loves me."
.33	9	Expresses appreciation of others' acts.
.44	13	Says "Everyone picks on me".
.42	14	Finishes task last, asks for help, makes mistakes.

Table 12 (continued)

FACTOR II (continued)

LOADING	ITEM NO.	ITEM CONTENT
.38	15	Withdraws; remains quiet; does not talk back when others shove, hit, accuse, or critize him.
.38	18	Expresses delight over the happiness of others (claps hands, says "That's good.").
.42	23	Spells poorly.
.51	27	Expresses desire to "get ahead", to accomplish, to become great or famous.
.48	36	Discusses own problems with others.
.37	45	States "I'm sorry," "Won't you forgive me" more than others do. (Expresses great remorse, apologizes repeatedly, cries after hurting or telling untruths or destroying property.)
.52	54	Sought out by others; others state they like him; among first selected for teams, etc.
.49	55	Is easily upset by changes in things around him.
.42	63	Acts promptly without grumbling; sometimes does more than asked; states "All right."
.39	77	Expresses worry or concern about bad grades, health, etc.

FACTOR III - Rebelliousness and Hostility

LOADING	ITEM NO.	ITEM CONTENT
-.44	43	Consistently complains about grades; questions teacher's grading system.

Table 12 (continued)

FACTOR III (continued)

LOADING	ITEM NO.	ITEM CONTENT
-.46	53	Is careless with school property.
-.50	58	Says "Others are to blame" for own actions.
-.50	59	Doesn't do homework.
-.40	61	Refuses to go along with class decisions.
-.49	65	Hurts other children (pinches, hits, kicks or other destructive acts).
-.37	68	Consistently wants to do something differently from the other students.
-.53	71	Moves constantly; "gets into everything"; "swarms all over".
-.43	74	Never studies for tests.
-.33	76	Sticks gum on desks.
-.59	78	Chatters; keeps talking or interrupting conversation.
-.64	79	Pulls other children's hair, punches them, steps on toes.
-.61	81	Puts up argument when told he can't do something.
-.65	82	Gets school books dirty and torn.
-.60	83	Rushes off to do things before instructions are finished; "can't wait".
-.64	84	Hits smaller children; "picks on" weaker or smaller children.

Table 12 (continued)

FACTOR IV - Not Interpretable

LOADING	ITEM NO.	ITEM CONTENT
.49	2	Threatens teacher verbally.
.59	11	Shoots craps in hall, bathroom.
.64	12	Makes vulgar signs with hands and fingers.
.50	20	Cheats on tests.

FACTOR V - Not Interpretable

LOADING	ITEM NO.	ITEM CONTENT
.36	5	Fails to carry out tasks (school assignments).
.41	16	Leaves seat to sharpen pencil, walks around room.

The three interpretable factors have been assigned the following names based on an inspection of the item content.

Factor I. Vulgar, Aggressive, Non-Conformity

Factor II. Dependent, Ingratiating Behavior

Factor III. Rebelliousness and Hostility

Factor IV and V. Not Interpretable

Comparable image-type factor analyses were made of the Behavior Classification Check List responses of the teachers in the two Texas school systems in which the consultation project was conducted and, subsequently, the resulting factor matrices were compared by the cosines of vectors method with the basic factor matrix found for the Minnesota sample of teachers. The results are shown in Tables 13 and 14 and indicate (a) that five factors were found in each analysis of the BCCL, and (b) that generally the factors were reasonably comparable from one analysis to another.

Table 13

Cosines of Factor Vectors (Invariance Coefficients)
Comparing BCCL Factor Matrices
for Minnesota and Texas Community A Teachers

Texas Community A Factors	Minnesota Factors I	II	III	IV	V
I					-.73
II		1.00			
III			.74		
IV	.88				
V				.89	

Table 14

Cosines of Factor Vectors (Invariance Coefficients)
Comparing BCCL Factor Matrices
for Minnesota and Texas Community B Teachers

Texas Community B Factors	Minnesota Factors I	II	III	IV	V
I	.70				
II		.95			
III					.83
IV				-.58	
V			.80		

The items belonging to (i.e., loading) each of the three interpretable factors in the original (Minnesota) analysis were scored as subscales of the BCCL. Next, interscale correlations and split-half Spearman-Brown corrected reliabilities were calculated for all teachers (N = 1396). The reliabilities were as follows:

Scale 1. Vulgar, Aggressive, Non-Conformity: $r_{12} = .94$

Scale 2. Dependent, Ingratiating Behavior: $r_{12} = .81$

Scale 3. Rebelliousness and Hostility: $r_{12} = .92$

Table 15

Intercorrelations Among Three BCCL Subscales*

Scale No.	1	2	3
1	.94	.38	-.63
2		.81	-.27
3			.92

*Split-half, Spearman-Brown reliabilities in diagonal

Ideal Pupil Check List. It has been our view of things that a part of any school person's readiness to utilize consultation and to change under its press consists of his conception of the kind of behavior which children should, ideally, develop and manifest. It might be argued, in this connection, that in the elementary school such concepts probably represent goals which teachers hold for children and which, however skillfully or awkwardly, they strive to implement in their relationships with children. It has long been realized, however, that school people vary greatly in their conceptions of ideal child behavior, some stressing, for example, docility and conformity to imposed norms, and others, perhaps, stressing elements of "self actualization". The point, then, is that teachers who hold different idealized images of children may be differentially likely to use consultation services.

In order to assess each potential consultee's conceptions of what constitutes desirable child behavior, we administered a 66-item adjective check list entitled "What is an Ideal Pupil?". This check list was originally devised by Torrance at the Bureau of Educational Research at the University of Minnesota for use in studies at that institution and we have used it with Torrance's permission. It appears in the Appendix.

Our approach to developing scoring scales for the Ideal Pupil Check List has been the same as that used for the instruments previously described in this Chapter and as was employed in developing factor based scales for DOTO as described in Chapter IV. Essentially, the items were intercorrelated for a sample of 584 Minnesota elementary school teachers, then factor-analyzed by the image analysis method recommended by Veldman (1967). Next, the same kind of factor analysis was performed separately for the two samples of teachers in the Texas communities which served in the project. The Minnesota factor matrix was then compared with each of the two other matrices to see if the factors from the separate matrices were similar. Subsequently all subjects were pooled together and each one's responses were scored on scales whose scoring was based on the factor analyses.

In the case of the Ideal Pupil Check List, three item factors were obtained in each analysis. The items loading each factor in the Minnesota are shown in Table 16. The names assigned to these factors are:

Factor I. Autonomous Pupil

Factor II. Negativistic, Critical Pupil

Factor III. Conforming, Obedient Pupil

Table 16

Items Loading Three Factors in the

Ideal Pupil Check List for 548 Minnesota Subjects

FACTOR I - Autonomous Pupil

LOADING	ITEM NO.	ITEM CONTENT
.39	1	Adventurous
.39	2	Affectionate
.30	4	Always asking questions
.34	5	Attempts difficult jobs
.30	6	Becomes preoccupied with tasks
.40	9	Courageous in convictions
.35	13	Curious
.41	19	Feels strong emotions
.37	27	Independent in judgment
.43	30	Intuitive
.35	31	Likes to work alone
.47	36	Persistent
.36	37	Physically strong
.34	38	Popular, well-liked by peers
.48	39	Prefers complex tasks
.36	46	Self-assertive
.44	48	A self-starter

Table 16 (continued)

FACTOR I (continued)

LOADING	ITEM NO.	ITEM CONTENT
.34	50	Sense of beauty
.40	54	Spirited in disagreement
.38	55	Strives for distant goals
.32	62	Unwilling to accept things on mere say-so
.43	64	Visionary
.40	66	Willing to take risks

FACTOR II - Negativistic, Critical Pupil

LOADING	ITEM NO.	ITEM CONTENT
.43	12	Critical of others
.56	16	Disturbs class procedures or orgainization
.62	18	Domineering
.62	22	Fault-finding
.48	23	Fearful
.44	24	A good guesser
.53	25	Haughty and self-satisfied
.58	33	Negativistic
.51	56	Stubborn
.48	59	Timid

Table 16 (continued)

FACTOR III - Conforming Obedient Pupil

LOADING	ITEM NO.	ITEM CONTENT
.35	7	Conforming
.30	11	Competitive
.32	17	Does work on time
.47	32	Neat and orderly
.45	35	Obedient
.41	42	Refined
.39	44	Remembers well
.35	45	Reserved
.39	65	Willing to accept judgments of authorities

Tables 17 and 18 show that the three Ideal Pupil Check List factors obtained with Minnesota teachers were found virtually identically in the two Texas teacher samples involved in the project.

Table 17

Cosines of Factor Vectors (Invariance Coefficients)
Comparing Ideal Pupil Check List Factors
for Minnesota Teachers and Texas Community A Teachers

Minnesota Factors	Texas Community A Factors		
	I	II	III
I	.97		
II		.99	
III			.97

Table 18

Cosines of Factor Vectors (Invariance Coefficients)
Comparing Ideal Pupil Check List Factors
for Minnesota Teachers and Texas Community B Teachers

Minnesota Factors	Texas Community B Factors I	II	III
I			-.96
II		1.00	
III	.97		

When it had been shown by factor matching procedures that similar factors were found for the Ideal Pupil Check List for all three teacher samples, their individual protocols were pooled together and then were scored for three factor-based scales. Interscale correlations were computed by the product-moment method and scale reliabilities were determined by the split-halves Spearman-Brown method with the results reported in Table 19. From these data it appears that the three Ideal Pupil Check List factor-based scales have minimally adequate reliabilities and appropriately low interscale associations.

Table 19

Interscale Correlations and Reliability Coefficients*

for the Ideal Pupil Check List (N = 1269)

Factor Scales	1	2	3
1. Autonomous Pupil	.82	-.03	.35
2. Negativistic, Critical Pupil		.79	-.16
3. Conforming, Obedient Pupil			.60

*Split-halves Spearman-Brown reliabilities in diagonal

Child Attitudes Survey (CAS). Another aspect of readiness for change in teachers' orientations would seem, logically, to involve beliefs about children--about the causes of their behavior and appropriate ways of managing children. Thus, we have sought to measure certain dimensions of teachers' attitudes or beliefs about child behavior, its comprehensibility and its causes using a Child Attitudes Survey (CAS) resembling various others that have appeared in the literature.

An image-type factor analysis (varimax rotation) of the CAS items for a sample of 643 Minnesota elementary teachers revealed two factors which were identically obtained for teachers in the two Texas demonstration project communities. The items loading each factor in the Minnesota sample are shown, along with the names assigned to the factors, in Table 20. The factors have been named as follows:

Factor I. Environmental Control of Child Behavior

Factor II. Hereditary Causation of Child Behavior

Apparently, then, the CAS can be taken to indicate a teacher's relative preference for environmentalistic or nativistic explanations for children's behavior.

When scored as subscales of the CAS, Factors I and II correlated .55 for 1340 elementary teachers. The split-half Spearman-Brown corrected, reliability coefficients for the two scales were:

Scale 1. Environmental Control of Child Behavior: $r_{12} = .82$

Scale 2. Hereditary Causation of Child Behavior: $r_{12} = .80$

Table 20

Factors Identified in Child Attitudes Survey

for 643 Minnesota Subjects

FACTOR I - Environmental Control of Child Behavior

LOADING	ITEM NO.	ITEM CONTENT
.49	6	A mother has a right to know everything going on in child's life because her child is a part of her.
.56	10	Parents should make it their business to know everything their children are thinking.
.33	12	Children must be told exactly what to do and how to do it or they will make mistakes.
.56	16	It is a parent's duty to make sure he knows a child's innermost thoughts.
.33	18	If rules are not closely enforced children will misbehave and get in trouble.
.54	20	More parents should make it their job to know everything their child is doing.
.65	22	An alert parent should try to learn all his child's thoughts.
.58	28	Children have no right to keep anything from their parents.
.54	30	A child should never keep a secret from his parents.

Table 20 (continued)

FACTOR II - Hereditary Causation of Child Behavior

LOADING	ITEM NO.	ITEM CONTENT
.33	1	When you come right down to it, a child is either good or bad and there's not much you can do about it.
.32	2	It is hard to let children go and visit people because they might misbehave when parents or teachers aren't around.
.31	3	With all a child hears on TV and radio and from friends, there's little an adult can do to influence him.
.36	5	Psychologists now know that what a child is born with determines the kind of person he becomes.
.33	14	It is hard to know when to let boys and girls play together when they can't be seen.
.32	15	Most of the bad traits children have (like nervousness or bad temper) are inherited.
.31	17	A child that comes from bad stock does not have much chance of amounting to anything.
.44	19	Some children are so naturally headstrong that an adult can't really do much about them.
.44	21	Why children behave the way they do is too much for anyone to figure out.
.34	25	If a child is born bad there's not much you can do about it.

Table 20 (continued)

FACTOR II (continued)

LOADING	ITEM NO.	ITEM CONTENT
.31	26	Children who are not watched will get into trouble.
.47	27	A child is destined to be a certain kind of person no matter what the parents or teachers do.
.37	29	Some children are just naturally bad.

Milieu Factors

We have held the hypothesis that change in teachers through the utilization of consultation should be in some part a function of differences in how the teacher perceives the school environment or milieu. Teachers whose view of the school is one which holds that administration is highly effective and morale strong should probably utilize consultation more frequently than those who do not see things thus. Similarly we would expect those who see the school environment as emphasizing both intellectual activity and character development should be among the frequent users of consultation and should change significantly under its press. On the other hand, school people who evince substantial cynicism and discouragement about the school, its goals, and administration should probably be low users of and changers under consultation. Put otherwise, we would think that the first two factors, along with frequency of use of consultation, would significantly predict changes in the orientations of teachers, whereas the last factor would have little to do with change or might even bear a negative relationship to change.

To measure the factors noted above, we developed a self-report School and Community Survey--A 50-item device to each item of which the school person responds on a 5-point "agree-disagree" continuum. This device was administered to 605 Minnesota elementary school teachers and their item responses subjected to image analysis to identify the factors measured by the Survey. The item factors which were so identified are shown in Table 21, and were named:

Factor I. Effective Administration and High Morale

Factor II. School's Emphasis on Intellectual Activity and Character Development

Factor III. Teacher Discouragement and Cynicism

Similar image analyses were performed on the School and Community Survey responses of the teachers in the two Texas project communities and these two factor matrices were compared ("matched") with the Minnesota matrix by the cosines of vectors method as was done with other instruments described in this report. The results are shown in Table 22. Generally, the data shown in Table 22 show that comparable School and Community Survey factors were found in the three samples of teachers examined in this project.

Table 21

Factors Identified in the School and Community Survey

for 605 Minnesota Subjects

FACTOR I - Effective Administration and High Morale

LOADING	ITEM NO.	ITEM CONTENT
.55	5	It would be very difficult to find a school system which would provide more satisfaction to a professional teacher than does my school district.
.44	8	Present teacher selection procedures in this district secure outstanding colleagues for teaching positions.
.38	10	Faculty meetings in this school almost always contribute to the professional growth and interest of teachers.
.47	12	When a teacher at my school does an exceptionally good job, he is likely to receive praise and public recognition.
.31	15	The salary scale in my school system is entirely adequate, if not ideal.
.40	17	Teacher-parent relations in this school are characterized by a mutual understanding of and striving for, the child's welfare.
.38	18	There is a great deal of personal friendship and warmth among the teachers in my school.
.58	20	My school-community is an excellent place for a teacher to live and work.

Table 21 (continued)

FACTOR I (continued)

LOADING	ITEM NO.	ITEM CONTENT
.48	21	Teachers are not only accepted, but they are welcomed into the life of this community.
.48	22	Our Board of Education could scarcely be more concerned than they are about our teachers' welfare.
.56	23	The central administration of our school district shows a very high degree of cooperation with teachers.
.44	24	The fringe benefits offered to teachers in my school district are outstandingly good.
.60	25	Good or outstanding work is consistently and adequately rewarded and recognized in my school.
.57	26	It is a rewarding challenge to try to maintain the high quality of work expected of the teachers in my school.
.56	27	The main objectives of my school are pretty much in line with what I think the objectives of a good school should be.
.54	28	There are very few real difficulties of communication in my school.

Table 21 (continued)

FACTOR II - School's Emphasis on Intellectual Activity and Character Development

LOADING	ITEM NO.	ITEM CONTENT
.36	36	The "ideal child" produced by my school should have a balanced background of intellectual, athletic, and social activities.
.49	38	Generally speaking, my school believes that children must be taught very great respect for the experience and authority of their elders.
.44	39	There is a strong emphasis on good discipline in my school.
.50	40	My school system seems to emphasize the school's role and influence in the formation of a student's character. This school clearly stresses the importance of a teacher's setting a good example and providing appropriate goals for children.
.43	43	This school emphasizes formal, artistic achievement and appreciation.
.55	45	The importance of each child's developing a strong desire to excel at something important is emphasized by this school.
.58	46	Hard work, diligence, and perseverance are felt by my school to be the most important virtues for the child to learn during his school career.
.57	47	In this school, we emphasize the importance of a child's learning to spend his time in useful, productive work.

Table 21 (continued)

FACTOR II (continued)

LOADING	ITEM NO.	ITEM CONTENT
.51	48	The importance of gaining a sound, general background of knowledge in many fields is stressed in this school.
.45	49	My school emphasizes intellectual activities much more strongly than it does social and practical ones.

FACTOR III - Teacher Discouragement and Cynicism

LOADING	ITEM NO.	ITEM CONTENT
-.37	2	Most teachers in my school have very high morale.
.36	6	Members of our faculty differ widely on educational matters.
.48	7	Teachers in this school often go through the day in quiet desperation.
.37	9	Much of what teachers are required to teach and to do seems unimportant or meaningless.
.34	11	I would not hesitate to move from this school district if another school system offered a 10% higher salary scale.
.44	13	Differences on educational issues are seldom faced squarely by this school's teachers and administration.
.52	14	Too many of our teachers here are discouraged and cynical about teaching.

Table 21 (continued)

FACTOR III (continued)

LOADING	ITEM NO.	ITEM CONTENT
.37	31	The stress which our school places on the development of children's social skills works to the disadvantage of the teaching of subject matter.
.49	41	In my school there is little real emphasis on teaching a child to deal effectively with his own day to day problems of living in and out of school.
.52	42	My school only gives "lip service" to the aim of developing each child's creative talents.
.48	50	Social activities are looked upon as a frill in my school and are consistently downgraded.

Table 22

Cosines of Factor Vectors (Invariance Coefficients)
Comparing Minnesota Teacher Factors for School-Community Survey
with Factors for Teachers in Two Texas Communities

Minnesota Factors	Texas Community A Factors			Texas Community B Factors		
	I	II	III	I	II	III
I			-.97	.83		
II	.78				1.00	
III		.81				.83

When the three factors of the School and Community Survey were scored for all teachers (N = 1332) as, scales with the "agree-disagree" continuum for each item weighted from 5-1, the interscale correlations and split-half Spearman-Brown reliabilities shown in Table 23 were obtained. Generally, these interscale correlations appear sensible and the reliabilities are satisfactory if not high.

Table 23

Interscale Correlations and Split-Half Spearman-Brown Reliability*

Coefficients for School-Community Survey

Factor Scales	1	2	3
1. Effective Administration-High Morale	.87	.50	-.46
2. School Emphasis on Intellect & Character		.74	-.14
3. Teacher Discouragement and Cynicism			.75

*Reliability Coefficients shown in diagonal

Professional Role Expectations

A forced-choice Professional Role Expectations Inventory (see Appendix) was devised in an effort to measure the degree to which teacher subjects ascribed responsibility for a wide range of educational tasks in the school to one of seven school roles, as follows:

1. Teacher
2. Counselor
3. Principal
4. Visiting Teacher
5. School Nurse
6. Instructional Supervisor
7. Assistant Superintendent

A sample item from the Professional Role Expectations Inventory (PREI) is the following.

Item No. 3. Develop a complete case study of a problem pupil.

M L Teacher
M L Counselor
M L Principal

Each respondent to the PREI was asked to indicate, for each educational task item, which of the three choices offered he would most and least expect to perform the task. Thus in Item No. 3, above, the counselor might be the one most expected to make a case study. The choices within the 20 items were scored 3 for "Most," 1 for "Least," and 2 for neither most nor least. There were 20 opportunities to pick each role except those of Principal and School Nurse for which there were 10 opportunities. Thus, summed across items, the range of possible scores was from 20-60 for 5 roles and 10-30 for the remaining two roles.

Using 124 Texas Community B teachers, Kuder-Richardson short formula reliability coefficients were computed for each of the 7 role scales of the PREI. These ranged from .10 (Principal) to .63 (Supervisor) with a median value of .51 (Assistant Superintendent). These reliability coefficients were deemed to be too low to warrant further work with the PREI. Beyond the reliability issue, however, we were forced to recognize that the instrument was logically faulty. It should have been scoreable, not merely for school-related roles, but for roles by classes of tasks as well. In any event, however, the low degree of the scale reliabilities was considered a sufficient basis for discontinuing work with the PREI.

CHAPTER VI

DESIGN AND ANALYSIS: MAJOR RESULTS AND CONCLUSIONS

This Chapter will report the general design of the project, indicate the methods of analysis employed with the data, and present the main results and conclusions.

General Design

The present project was designed in the first instance as a quasi-controlled experiment. This is to say that, in order to assure that there would be at least two levels of consultation utilization, certain schools in Texas Communities "A" and "B" were designated as "demonstration" (or experimental) schools and certain other schools in each community were designated as "comparison" (or control) schools. A total of 8 elementary schools in Community A were treated as demonstration schools with 8 other schools serving as comparison schools. In Community B, 6 schools served as demonstration schools and 6 others as comparison schools. It should be understood, however, that schools as such were not the units of direct interest. Instead the sets of teachers in these schools constituted the subjects for demonstration and comparison purposes in the experiment.

In the early autumn of 1964 all self-report instruments described in the previous two chapters were administered to all teachers in both the demonstration and comparison schools. This initial administration gave baseline scores on the Dimensions of Teachers' Opinions (DOTO) scales so that subsequent administrations of that instrument in the autumn of 1965 (a year later) and in the spring of 1967 (2½ years later), when all consultation had been ended, could be used to define DOTO scale changes in analysis.

The administration in the fall of 1964 of the instruments designed to measure background, readiness, role definition, and milieu perception factors (described in Chapter V) was based on our recognition that these instruments would be needed to test out our paradigm's assertions (predictions) about the relationships of these kinds of factors to changes revealed by criterion devices such as DOTO over time. These relationships could, it was realized, be tested by multiple linear regression analysis, or, alternatively, by the application of analysis of variance methods.

Initial Comparability of Personnel in Demonstration and Comparison Schools

A first question to be answered by data analysis asked whether or not the personnel of demonstration and comparison schools were comparable on the various scales of DOTO at the initiation of the demonstration and research project. The results bearing on this question arise from single classification analyses of variance comparing the scores of teachers in demonstration and comparison schools in the two project communities. These results are shown in

Table 24 and clearly indicate that there were no significant differences found between demonstration and comparison school personnel on DOTO at the beginning of the project.

Table 24

Results of Single Classification Analyses of Variance Comparing Demonstration and Comparison School Personnel on DOTO Scales

DOTO Scale*	Community A Schools				Community B Schools			
	M_{Dem} N = 182	M_{Com} N = 172	F	P	M_{Dem} N = 131	M_{Com} N = 168	F	P
1	93.4	93.2	.04	.83	94.4	95.1	.04	.83
2	128.9	125.6	1.01	.32	130.4	129.1	.75	.61
3	40.0	36.8	2.14	.14	35.5	35.5	.00	.99
4	15.1	12.0	1.04	.31	11.1	11.2	.00	.95
5	64.8	65.1	.06	.81	65.5	65.4	.01	.90

*DOTO Scale Names

1. Permissive _vs._ Authoritarian Orientation to Children
2. Sophisticated _vs._ Naive Management of Child Behavior
3. Superficial _vs._ Informed Mental Health Concepts
4. Direct Efforts to Help Children _vs._ Ignoring
5. APA-Preferred Responses

Change Across Time in DOTO-Measured Factors

The most severe test that could be made of the efficacy of child behavior consultation was to ask that, subsequent to its use in the demonstration schools, the personnel of those schools should differ significantly in their DOTO scores from personnel in comparison schools. The experimental hypothesis obviously was that consultation, viewed as treatment, should have produced significant change in the demonstration schools over and above any change occurring in the personnel of the comparison schools. This hypothesis was tested by means of analysis of variance procedures using 5 DOTO scales as measures of the dependent variables. These analyses were applied to repeated trials (i.e., testings) with DOTO, the demonstration and comparison schools in the two project communities being compared. Schematically considered, these analyses were made according to the following formats.

Design Format A

	Comparison Schools	Demonstration Schools
Time 1 - Fall 1964		
Time 2 - Fall 1965		

Time Period I

Design Format B

	Comparison Schools	Demonstration Schools
Time 1 - Fall 1964		
Time 2 - Spring 1967		

Time Period II

Analyses made according to the foregoing pair of general designs revealed that *no significant changes occurred on DOTO scales over the period of the experiment* as between demonstration and comparison school personnel - see Tables 25-34.

Table 25

Analyses of Variance Comparing Demonstration and Comparison School Personnel Over the First Consultation Year (Fall 1964-Fall 1965) on DOTO Scale I: Authoritarian Orientation Toward Children

Trials: Times of Testing	Community A Schools		Community B Schools	
	M_{Com} N = 114	M_{Dem} N = 121	M_{Com} N = 109	M_{Dem} N = 89
Fall 1964	94.5	93.8	94.8	95.2
Fall 1965	96.6	95.2	96.4	96.5

Comparisons

	F	*p*	*F*	*p*
Between Groups	.50	.51	.03	.86
Between Trials (Times)	5.60	.02	3.84	.05
Groups x Trials	.21	.65	.04	.85

Table 26

Analyses of Variance Comparing Demonstration and Comparison School Personnel (Fall 1964-Spring 1967) on DOTO Scale I: Authoritarian Orientation Toward Children

Trials: Times of Testing	Community A Schools		Community B Schools	
	M_{Com} N = 99	M_{Dem} N = 89	M_{Com} N = 77	M_{Dem} N = 61
Fall 1964	94.0	95.7	95.3	95.2
Spring 1967	97.7	98.3	101.4	97.6

Comparisons

	F	*p*	*F*	*p*
Between Groups	.48	.50	1.04	.31
Between Trials (Times)	16.19	.00	23.32	.00
Groups x Trials	.43	.52	3.56	.05

Table 27

Analyses of Variance Comparing Demonstration and Comparison School Personnel Over the First Consultation Year (Fall 1964-Fall 1965) on DOTO Scale II: Sophisticated Management of Child Behavior

Trials: Times of Testing	Community A Schools		Community B Schools	
	M_{Com} N = 114	M_{Dem} N = 121	M_{Com} N = 109	M_{Dem} N = 89
Fall 1964	126.5	126.5	129.6	131.8
Fall 1965	126.3	127.7	128.6	129.9

Comparisons

	F	*p*	*F*	*p*
Between Groups	1.43	.23	.22	.65
Between Trials (Times)	3.39	.06	.30	.59
Groups x Trials	.42	.52	.56	.54

Table 28

Analyses of Variance Comparing Demonstration and Comparison School Personnel (Fall 1964-Spring 1967) on DOTO Scale II: Sophisticated Management of Child Behavior

Trials: Times of Testing	Community A Schools		Community B Schools	
	M_{Com} N = 99	M_{Dem} N = 89	M_{Com} N = 77	M_{Dem} N = 61
Fall 1964	127.0	128.3	129.1	131.2
Spring 1967	128.3	129.7	128.9	128.3

Comparisons

	F	p	F	p
Between Groups	.14	.71	.90	.65
Between Trials (Times)	1.76	.18	1.89	.17
Groups x Trials	1.76	.18	.01	.94

Table 29

Analyses of Variance Comparing Demonstration and Comparison School Personnel Over the First Consultation Year (Fall 1964-Fall 1965) on DOTQ Scale III: Superficial vs. Informed Mental Health Concepts

Trials: Times of Testing	Community A Schools		Community B Schools	
	M_{Com} N = 114	M_{Dem} N = 121	M_{Com} N = 109	M_{Dem} N = 89
Fall 1964	37.6	37.2	34.2	33.8
Fall 1965	38.9	37.9	36.4	35.4

Comparisons

	F	*p*	*F*	*p*
Between Groups	.71	.60	.39	.54
Between Trials (Times)	5.87	.02	14.08	.00
Groups x Trials	.61	.56	.20	.66

Table 30

Analyses of Variance Comparing Demonstration and Comparison School Personnel (Fall 1964-Spring 1967) on DOTO Scale III: Superficial vs. Informed Mental Health Concepts

Trials: Times of Testing	Community A Schools		Community B Schools	
	M_{Com} N = 99	M_{Dem} N = 89	M_{Com} N = 77	M_{Dem} N = 61
Fall 1964	37.2	37.5	36.2	33.9
Spring 1967	40.7	41.7	39.6	38.4

Comparisons

	F	*p*	*F*	*p*
Between Groups	.39	.54	1.63	.20
Between Trials (Times)	66.99	.00	39.71	.00
Groups x Trials	.52	.52	.88	.65

Table 31

Analyses of Variance Comparing Demonstration and Comparison School Personnel Over the First Consultation Year (Fall 1964-Fall 1965) on DOTO Scale IV: Direct Efforts to Help Children

Trials: Times of Testing	Community A Schools		Community B Schools	
	M_{Com} N = 114	M_{Dem} N = 121	M_{Com} N = 109	M_{Dem} N = 89
Fall 1964	11.9	12.3	11.0	11.0
Fall 1965	13.1	12.5	11.7	11.7

Comparisons

	F	*p*	*F*	*p*
Between Groups	2.68	.10	.00	.99
Between Trials (Times)	11.79	.00	2.45	.11
Groups x Trials	.12	.73	.15	.70

Table 32

Analyses of Variance Comparing Demonstration and Comparison School Personnel (Fall 1964-Spring 1967) on DOTO Scale IV: Direct Efforts to Help Children

Trials: Times of Testing	Community A Schools		Community B Schools	
	M_{Com} N = 99	M_{Dem} N = 89	M_{Com} N = 77	M_{Dem} N = 61
Fall 1964	12.0	12.4	11.2	11.5
Spring 1967	12.9	12.7	12.3	12.0

Comparisons

	F	*p*	*F*	*p*
Between Groups	.17	.69	.01	.94
Between Trials (Times)	5.95	.01	7.86	.01
Groups x Trials	1.24	.27	.79	.62

Table 33

Analyses of Variance Comparing Demonstration and Comparison School Personnel Over the First Consultation Year (Fall 1964-Fall 1965) on DOTO Scale V: APA-Preferred Responses

Trials: Times of Testing	Community A Schools		Community B Schools	
	M_{Com} N = 114	M_{Dem} N = 121	M_{Com} N = 109	M_{Dem} N = 89
Fall 1964	65.9	64.8	65.1	64.9
Fall 1965	67.9	66.4	65.8	66.0

Comparisons

	F	*p*	*F*	*p*
Between Groups	2.68	.10	.00	.99
Between Trials (Times)	11.79	.00	2.45	.11
Groups x Trials	.12	.73	.15	.70

Table 34

Analyses of Variance Comparing Demonstration and Comparison School Personnel (Fall 1964-Spring 1967) on DOTO Scale V: APA-Preferred Responses

Trials: Times of Testing	Community A Schools		Community B Schools	
	M_{Com} N = 99	M_{Dem} N = 89	M_{Com} N = 77	M_{Dem} N = 61
Fall 1964	65.9	64.5	66.0	65.7
Spring 1967	68.1	68.4	67.6	66.2

Comparisons

	F	*p*	*F*	*p*
Between Groups	.17	.69	.36	.56
Between Trials (Times)	27.48	.00	2.38	.12
Groups x Trials	2.58	.11	.53	.52

Change in Teachers Within Demonstration Schools

It is conceivable that expecting differences in DOTO scores across demonstration ("experimental") and comparison ("control") schools as a function of the availability or non-availability of child behavior consultation for two years was unrealistic. After all, aside from the fact that no teachers in the comparison schools had access to consultation services, it is true that a substantial proportion of teachers in the demonstration schools did not take advantage of the service. This means, in effect, that there was differential utilization of child behavior consultation by the personnel within demonstration (i.e., "experimental") schools, and so we should expect differences in criterial change (DOTO scales) as a function of different amounts of use of consultation. This hypothesis has been examined, by analysis of variance procedures, in essentially the same manner as was the hypothesis that demonstration school personnel should differ from comparison school personnel on the pertinent scales of DOTO. This is to say that a groups (N of consultations) by trials (times of testing) design was employed according to the following formats.

Design Format A

Level of Consultation	Non-Cons.	1 Con.	2 Con.	3-5 Con.	6+ Con.
Time 1 - Fall 1964					
Time 2 - Fall 1965					

Design Format B

Level of Consultation	Non-Cons.	1 Con.	2 Con.	3-5 Con.	6+ Con.
Time 1 - Fall 1964					
Time 2 - Spring 1967					

Analyses made of DOTO scale scores in the demonstration schools of two project communities separately almost uniformly showed a lack of statistically significant differences of a sort which would support the hypothesis that differential frequency of consultation was associated with differences in DOTO Scale scores. The relevant results appear in Tables 35-44.

Table 35

Analyses of Variance Comparing Five Levels of Consultation Frequency Within Demonstration Schools

Across the First Year of Consultation (Fall 1964-Fall 1965) on DOTO Scale I:

Authoritarian Orientation Toward Children

Trials: Times of Testing	Community A Demonstration Schools					Community B Demonstration Schools				
	M_{non-c} N = 31	M_{1c} N = 21	M_{2c} N = 22	M_{3-5c} N = 26	M_{6+c} N = 21	M_{non-c} N = 35	M_{1c} N = 8	M_{2c} N = 11	M_{3-5c} N = 26	M_{6+c} N = 9
Fall 1964	89.9	86.7	93.8	93.2	99.4	96.9	97.1	95.1	93.4	91.8
Fall 1965	95.9	94.5	95.9	90.3	100.4	97.6	106.0	95.1	93.4	94.6

Comparisons

	F	p	F	p
Between Groups	2.06	.09	.94	.56
Between Trials (Times)	4.96	.03	1.28	.26
Groups x Trials	2.33	.06	1.11	.36

Table 36

Analyses of Variance Comparing Five Levels of Consultation Frequency Within Demonstration Schools (Fall 1964-Spring 1967) on DOTO Scale I: Authoritarian Orientation Toward Children

Trials: Times of Testing	Community A Demonstration Schools					Community B Demonstration Schools				
	M_{non-c} N = 20	M_{1c} N = 14	M_{2c} N = 16	M_{3-5c} N = 21	M_{6+c} N = 18	M_{non-c} N = 24	M_{1c} N = 7	M_{2c} N = 8	M_{3-5c} N = 17	M_{6+c} N = 5
Fall 1964	93.0	91.7	98.9	95.1	99.7	97.5	94.1	99.9	90.7	93.6
Spring 1967	97.0	97.9	101.9	95.6	100.2	96.6	104.7	98.3	97.4	97.6

Comparisons

	F	p	F	p
Between Groups	1.48	.21	.43	.79
Between Trials (Times)	4.56	.03	2.56	.11
Groups x Trials	.75	.56	1.76	.15

Table 37

Analyses of Variance Comparing Five Levels of Consultation Frequency Within Demonstration Schools Across the First Year of Consultation (Fall 1964-Fall 1965) on DOTO Scale II: Sophisticated Management of Child Behavior

Trials: Times of Testing	Community A Demonstration Schools					Community B Demonstration Schools				
	$M_{non\text{-}c}$ N = 31	M_{1c} N = 21	M_{2c} N = 22	$M_{3\text{-}5c}$ N = 26	M_{6+c} N = 21	$M_{non\text{-}c}$ N = 35	M_{1c} N = 8	M_{2c} N = 11	$M_{3\text{-}5c}$ N = 26	M_{6+c} N = 9
Fall 1964	152.4	122.9	127.1	123.8	130.7	132.2	133.7	131.5	131.3	130.8
Fall 1965	127.7	129.6	126.9	122.3	133.3	129.1	131.0	124.6	131.5	134.6

Comparisons

	F	p	F	p
Between Groups	.81	.53	.42	.80
Between Trials (Times)	.51	.52	2.57	.11
Groups × Trials	.70	.60	1.50	.21

Table 38

Analyses of Variance Comparing Five Levels of Consultation Frequency Within Demonstration Schools (Fall 1965-Spring 1967) on DOTO Scale II: Sophisticated Management of Child Behavior

Trials: Times of Testing	Community A Demonstration Schools					Community B Demonstration Schools				
	M_{non-c} N = 20	M_{1c} N = 14	M_{2c} N = 16	M_{3-5c} N = 21	M_{6+c} N = 18	M_{non-c} N = 24	M_{1c} N = 7	M_{2c} N = 8	M_{3-5c} N = 17	M_{6+c} N = 5
Fall 1964	126.2	126.4	129.5	128.1	131.4	131.7	131.0	132.5	130.8	128.2
Spring 1967	131.0	132.0	129.3	127.3	129.6	126.3	134.1	122.8	129.7	133.4

Comparisons

	F	p	F	p
Between Groups	.20	.94	.25	.91
Between Trials (Times)	1.00	.68	5.25	.02
Groups × Trials	1.14	.34	2.91	.03

Table 39

Analyses of Variance Comparing Five Levels of Consultation Frequency Within Demonstration Schools
Across the First Year of Consultation (Fall 1964-Fall 1965) on DOTO Scale III:
Superficial vs. Informed Mental Health Concepts

Trials: Times of Testing	Community A Demonstration Schools					Community B Demonstration Schools				
	M_{non-c} N = 31	M_{1c} N = 21	M_{2c} N = 22	M_{3-5c} N = 26	M_{6+c} N = 21	M_{non-c} N = 35	M_{1c} N = 8	M_{2c} N = 11	M_{3-5c} N = 26	M_{6+c} N = 9
Fall 1964	54.4	61.1	38.4	35.8	38.9	33.9	33.8	33.9	33.4	34.2
Fall 1965	38.8	36.6	39.1	36.3	38.6	34.9	41.1	37.0	34.0	35.0

Comparisons

	F	*p*	*F*	*p*
Between Groups	.63	.65	.33	.86
Between Trials (Times)	1.64	.20	4.56	.03
Groups x Trials	.64	.64	1.51	.21

Table 40

Analyses of Variance Comparing Five Levels of Consultation Frequency Within Demonstration Schools (Fall 1964-Spring 1967) on DOTO Scale III: Superficial vs. Informed Mental Health Concepts

Trials: Times of Testing	Community A Demonstration Schools					Community B Demonstration Schools				
	M_{non-c} N = 20	M_{1c} N = 14	M_{2c} N = 16	M_{3-5c} N = 21	M_{6+c} N = 18	M_{non-c} N = 24	M_{1c} N = 7	M_{2c} N = 8	M_{3-5c} N = 17	M_{6+c} N = 5
Fall 1964	37.1	35.7	40.9	35.9	38.5	33.8	32.0	35.3	32.8	38.8
Spring 1967	41.3	38.9	45.0	40.4	42.9	37.5	41.3	43.3	35.9	40.0

Comparisons

	F	p	F	p
Between Groups	1.78	.14	.70	.60
Between Trials (Times)	36.76	.00	26.26	.00
Groups x Trials	.11	.98	1.88	.13

Table 41

Analyses of Variance Comparing Five Levels of Consultation Frequency Within Demonstration Schools Across the First Year of Consultation (Fall 1964-Fall 1965) on DOTO Scale IV: Direct Efforts to Help Children

Trials: Times of Testing	Community A Demonstration Schools					Community B Demonstration Schools				
	M_{non-c} N = 31	M_{1c} N = 21	M_{2c} N = 22	M_{3-5c} N = 26	M_{6+c} N = 21	M_{non-c} N = 35	M_{1c} N = 8	M_{2c} N = 11	M_{3-5c} N = 26	M_{6+c} N = 9
Fall 1964	30.8	31.3	12.3	12.4	11.8	11.1	11.9	10.8	11.2	9.8
Fall 1965	13.1	12.3	11.9	12.8	12.2	11.8	12.8	12.4	11.4	10.0

Comparisons

	F	p	F	p
Between Groups	.69	.60	.75	.57
Between Trials (Times)	1.85	.17	3.38	.07
Groups x Trials	.63	.64	.36	.84

Table 42

Analyses of Variance Comparing Five Levels of Consultation Frequency Within Demonstration Schools

From Fall 1964-Spring 1967 on DOTD Scale IV:

Direct Efforts to Help Children

Trials: Times of Testing	Community A Demonstration Schools					Community B Demonstration Schools				
	M_{non-c} N = 20	M_{1c} N = 14	M_{2c} N = 16	M_{3-5c} N = 21	M_{6+c} N = 18	M_{non-c} N = 24	M_{1c} N = 7	M_{2c} N = 8	M_{3-5c} N = 17	M_{6+c} N = 5
Fall 1964	13.2	12.4	12.1	12.4	11.8	11.3	12.0	11.4	11.8	10.8
Spring 1967	13.1	12.2	11.6	13.9	12.4	12.8	11.9	12.6	11.1	10.

Comparisons

	F	p	F	p
Between Groups	.75	.56	.25	.91
Between Trials (Times)	.66	.58	1.84	.18
Groups x Trials	.97	.57	1.56	.20

Table 43

Analyses of Variance Comparing Five Levels of Consultation Frequency Within Demonstration Schools Across the First Year of Consultation (Fall 1964-Fall 1965) on DOTO Scale V: APA-Preferred Responses

Trials: Times of Testing	Community A Demonstration Schools					Community B Demonstration Schools				
	M_{non-c} N = 31	M_{1c} N = 21	M_{2c} N = 22	M_{3-5c} N = 26	M_{6+c} N = 21	M_{non-c} N = 35	M_{1c} N = 8	M_{2c} N = 11	M_{3-5c} N = 26	M_{6+c} N = 5
Fall 1964	64.5	59.7	66.1	63.9	63.9	65.9	63.6	64.9	63.3	66.6
Fall 1965	68.5	64.1	66.1	66.9	65.1	65.8	69.6	69.9	63.9	65.0

Comparisons

	F	p	F	p
Between Groups	1.32	.27	.93	.55
Between Trials (Times)	6.84	.01	2.20	.14
Groups x Trials	.67	.61	2.26	.07

Table 44

Analyses of Variance Comparing Five Levels of Consultation Frequency Within Demonstration Schools (Fall 1964-Spring 1967) on DOTO Scale V: APA-Preferred Responses

Trials: Times of Testing	Community A Demonstration Schools					Community B Demonstration Schools				
	M_{non-c} N = 20	M_{1c} N = 14	M_{2c} N = 16	M_{3-5c} N = 21	M_{6+c} N = 18	M_{non-c} N = 24	M_{1c} N = 7	M_{2c} N = 8	M_{3-5c} N = 17	M_{6+c} N = 5
Fall 1964	66.0	62.7	67.4	63.1	63.3	67.0	64.4	67.9	63.0	69.2
Spring 1967	69.0	67.6	70.1	69.2	67.1	66.1	69.0	72.2	62.2	66.8

Comparisons

	F	p	F	p
Between Groups	.87	.51	2.04	.10
Between Trials (Times)	18.61	.00	.24	.63
Groups x Trials	.45	.78	1.11	.36

The results presented so far in this chapter have shown that:

(a) the personnel of demonstration and comparison schools did not differ significantly on five DOTO scales at the outset of the consultation project;

(b) the personnel of demonstration schools did not change on the five DOTO scales significantly more than did the personnel of comparison schools across the period of the project, although, in a few instances, both demonstration and comparison schools showed changes between earlier and later testings with DOTO;

(c) there was no evidence, within demonstration schools, of differential amounts of DOTO change associated with lesser or greater participation in consultation, i.e., frequency of consultation appeared not to be associated with differences in DOTO scores, although, occasionally, reliable differences occurred over the period of the project without regard to frequency of consultation.

Change in Consultation Report Form (CRF) Factors

It will be recalled from Chapter IV that a Consultation Report Form (CRF) was devised upon which Child Behavior Consultants attempted to record, as ratings--usually on nine-point scales--their impressions of the detailed character of each consultation session. These ratings were factor analyzed to reduce a substantial number of individual rating scale items to three second-order rating factors which were named, as follows:

Factor I:	"Consultee's Concern and Helping *vs.* Non-Involvement with Child Client"
Factor II:	"Consultee's Rapport with and Receptiveness to Consultant"
Factor III:	"Consultee's Relationship with Client and Judgment of Client's Disorder"

A sample of demonstration school teachers (N = 54) for whom complete data were available from which to derive their scores on the three CRF factors, and who had consulted three or more times, was identified. The question asked of their data in this instance was: Did significant changes occur in the ratings assigned to the teachers on the CRF factors between the first and the last consultation for each teacher? The method of answering this question was an analysis of variance procedure, equivalent to a t-test for correlated observations, the first and last CRF protocols for each subject being taken as "trials" measures. The results of this analysis are shown in Table 45.

Table 45

Analyses of Variance Comparing First and Last Consultation Scores on Three CRF Factors for 54 Teacher Consultees

CRF Factor No.	Mean First cons	Mean Last cons	F	p
I	99.74	104.24	3.37	.07
II	71.94	75.63	4.74	.03
III	20.50	20.48	.001	.98

The conclusions to be drawn from Table 45 are reasonably clear. First of all, it can be seen readily that no change from first to last consultation could be seen in Factor III having to do with the consultee's relationship with his child client and his judgment of the child client's disorder. Second, although close to statistical significance, there could, in fact, be judged to be no significant change over consultations in these teacher-consultee's (Factor I) "concern and helping" as against their "non-involvement" with their child clients. Finally, it appears that there was a significant gain in Factor II -- "Consultant-Consultee Rapport." The latter finding is as much as might have been expected over a series of consultations, since decreases in the Consultant's rapport with consultees should have led to a break-off of consultations.

The Prediction of Change in Positive Mental Health Promoting Orientations of Teachers

The evidence presented throughout previous portions of this Chapter has led to the conclusions that (1) differences attributable to the consultation treatment were not observed in comparisons of subjects from demonstration and comparison schools, and that (2) within demonstration schools measures of teachers' mental health promoting orientations did not differ significantly as a function of the degree of utilization of consultation. Since, therefore, there appeared to be no measurable effect of consultation, it has been deemed of no avail to present results of further analyses aimed at predicting DOTO change (within demonstration schools) by multiple linear regression methods. In effect this means (to the extent that our criterion measures are sensitive and validly reflective of mental health facilitating orientations) that our basic paradigm has failed to be explanatory, or predictive, of the operation of consultation to change teachers in sought for directions. Alternative explanations might be (1) that our measures were too indirect or too insensitive to pick up changes in teachers due to consultation, or

(2) that consultation is a relatively "low power" technique for effecting change and that it simply cannot produce measurable changes at the level of self-report, or (3) consultation may not have been continued long enough in this project to bring about change as we have chosen to measure it.

CHAPTER VII

RESULTS AND CONCLUSIONS: II

Major experimental results of interest in this project were presented in Chapter VI. The present Chapter will report various descriptive findings concerning the utilization of consultation services in the demonstration schools.

To What Extent Were Consultants Used in the Demonstration Schools?

What was the *extent* of the use made of consultation during the two years in which such services were offered? This question relates, of course, to the distribution of consultant utilization, and amounts to asking whether a relatively small or a relatively large proportion of potential consumers of the service availed themselves of it. After the first six months of the project's consultation service, in February 1965, 155 of 377 potential consultees, or 41 percent, had used consultation one or more times. By the close of the Project's services in May 1966, 306 of 383 potential consultees, *i.e.*, 80 percent, had used the service one time or oftener. More refined data on utilization are provided in Tables 46 and 47.

Table 46

Consultation Utilization in Demonstration Schools

Community and School	N Consultees Potential N	N Consultees Actual N	Percentage of Utilization	N Consultation Sessions
Community A				
School No. 1	25	19	76	65
2	39	39	100	121
3	23	18	78	60
4	26	26	100	106
5	24	20	83	47
6	29	23	79	107
7	33	23	70	76
8	18	18	100	75
TOTALS	217	186	85.7*	657
Community B				
School No. 1	27	27	100	89
2	38	22	79	68
3	26	24	93	88
4	34	24	71	63
5	15	9	60	53
6	26	14	54	52
TOTALS	166	120	72.3*	413

*Mean percentage utilization

Table 47

Number of Consultees and Their Frequency of Using Consultation by Community and Demonstration Schools from October 1964 Through May 1966

Community and School	N Potential Consultees	N of Consultees Using Service at Varying Frequencies								TOTALS
		1_{con}	2_{con}	3_{con}	4_{con}	5_{con}	6_{con}	7_{con}	8 or more $_{con}$	
Community A										
School No. 1	25	5	7	2	-	-	2	1	2	19
2	39	11	11	6	1	3	1	4	2	39
3	23	6	5	2	-	1	-	2	2	18
4	26	7	3	5	1	2	1	2	5	26
5	24	11	4	-	3	1	-	-	1	20
6	29	3	7	2	3	2	1	3	2	23
7	33	7	3	3	4	2	2	1	1	23
8	18	2	5	3	3	-	2	-	3	18
TOTALS	217	52	45	23	15	11	9	13	18	186
Community B										
School No. 1	27	8	8	1	2	-	5	2	1	27
2	38	4	5	7	3	1	-	1	1	22
3	26	11	3	-	4	1	1	1	3	24
4	34	7	9	4	2	-	-	-	2	24
5	15	2	1	1	1	2	-	-	2	9
6	26	3	4	1	2	1	1	-	2	14
TOTALS	166	35	30	14	14	5	7	4	11	120

It is apparent from the figures cited above, and from those shown in Tables 46 and 47, that the consultation service was widely used in all of the demonstration schools. In Community A schools, teacher usage of consultation averaged 85.7 percent of the teachers, while in Community B schools this usage averaged 72.3 percent of the personnel. Overall, 1070 consultation sessions were conducted by our Child Behavior Consultants--657 in Community A schools and and 413 in Community B schools. In Community A schools, 52 percent of those who used consultation engaged in no more than 2 sessions, while the comparable figure for Community B schools was 54 percent (_cf._, Table 47). Forty-eight and 46 percent, respectively, of personnel in the two sets of community schools utilized consultation for 3 or more sessions. One individual in a Community A school consulted 22 times; one person in a Community B school consulted on 21 separate occasions. Thus, the _range of usage_ was very wide, in terms of the number of consultations engaged in by school personnel, but the _median number_ of such sessions was two.

The Foci of Consultations

The foci of consultation can be portrayed descriptively in three different ways from our data. The primary "themes" which concerned the consultees are surely important to consider. So, too, are the "messages" reportedly employed by the consultant in his communications to consultees. The characteristics of the children consulted about are also of interest, especially since such information does not appear to have been presented elsewhere.

The Children Consulted About

Such data as we have available to us concerning the children consulted about are those contained in the Consultation Report Form as filled out by our consultants. Often the source of these data is the consultee, and since not all items were routinely or directly made known in consultation, the numbers reported in Table 48 vary from characteristic to characteristic. All inferences from Table 48 must be tempered accordingly.

Table 48

Characteristics of School Children Consulted About

Child Characteristics	N Times Consulted About Once	2-3 Times	4 or More	TOTALS
A. Grade Level				
1	46	58	54	158
2	47	52	27	126
3	65	80	67	212
4	44	53	25	122
5	43	48	37	128
6	29	47	39	115
TOTALS	274	338	249	861
B. Sex				
Male	249	195	165	609
Female	92	95	49	236
TOTALS	341	290	214	845
C. Family Size (N Siblings)				
0	10	12	14	36
1	36	18	25	79
2	70	83	60	213
3	72	49	46	167
4	34	18	21	73
5	17	12	11	40
6	11	15	6	32
7	2	4	3	9
7+	10	4	4	18
TOTALS	262	215	190	667

Sex of Child. Of 845 children consulted about one or more times, 609, or 72 percent, were boys and 28 percent were girls. Some 27 percent of the boys consulted about were the subjects of sessions 4 times or oftener; approximately 20 percent of the girls consulted about were subjects in 4 or more consultations. When it comes to being noticed enough to become a subject for consultation, this is obviously still "a man's world".

Grade in School. Approximately 58 percent of the children consulted about have been in the primary grades, i.e., grades 1-3. The remaining 42 percent have been in grades 4-6. In general, if early identification and prevention of behavior problems are among the goals of child behavior consultation, it would seem desirable that somewhat more consultation should occur about children in the earlier grades as it did.

Family Size. About 74 percent of the children consulted about, and for whom we have data on the Consultation Report Form, had 3 siblings or fewer. The modal number of sibs of children brought up as subjects of consultation was 2. Approximately 26 percent of the children consulted about had 4 sibs or more. By and large, then, these data suggest that the child subjects of consultation did not come from notably large families.

Degree of Emotional Handicap. Our Child Behavior Consultants were instructed, during the course of their training, in the preparation of ratings of each child consulted about on a 7-level scale of emotional handicap originally described by Bower (1959). The material basic to these ratings is not--repeat, not--a direct clinical psychological examination of the child who is a subject of consultation. Instead the child was rated by the Consultant as he was described by the consultee. We are aware of the indirect and possibly illusory character of such ratings and of the need, eventually, to validate them by direct examinations of children. In the present project, this was not feasible, so we were forced to rely on the indirect, ratings made by consultants as the most practical device available for getting some indication of the degree of behavioral disturbance present in the children whom school people brought up in consultation. The data are presented here (Table 49), therefore, surrounded by all caveats possible.

If approached and interpreted warily, the data in Table 49 are of considerable interest. Some 34.3 percent of 903 consultations centered about children who were judged to display moderate to severe behavioral disturbances, i.e., levels 4-7 of the Bower Rating Scale Another way to phrase this is to say that it seems as if most (64.7 percent) of the child behavior problems brought to a Consultant's attention appear to be relatively minor ones.

Table 49

Numbers of Children at Each Level of Classification of Child's Emotional Handicap: Bower's System* Applied By CBC's to Teacher Reports

Handicap Levels*	Consulted About			TOTALS
	Once	2-3 Times	4 or More	
1	24	21	16	61
2	81	73	62	216
3	108	109	90	307
4	76	61	70	207
5	34	29	21	84
6	14	7	2	23
7	1	2	2	5
TOTALS	338	302	263	903

*1. Children showing normal problems of everyday living
2. Transient problems as a result of normal crises
3. Minor character disorders which persist beyond normal expectations
4. Recurrent and fixed emotional problems of moderate intensity; symptoms strong and worrisome
5. Marked and recurrent emotional problems with long-term, severe symptoms
6. Borderline psychoneurosis-psychosis
7. Markedly disturbed, psychotic children

The frequency figures in Table 49 also seem to mean that the foregoing generalization _may_ be true regardless of how often children are the subjects of consultation, a fact brought out by Table 50 which shows that the mean rated degree of children's emotional handicap did not vary with the frequency of consultation. The teacher consultees in this project, then, may have been relatively perceptive of fairly minor difficulties in the lives of school children--perhaps a hopeful augury for those interested in preventive work with children.

The Content of Consultation

Themes. The "themes", which reflect the concern of the consultees as perceived and reported by the consultants, constitute an important aspect of the content of consultation. The Consultant's "messages", discussed briefly below, can be viewed as aimed at "theme reduction", _i.e._, at increasing the consultee's latitude in perceiving and acting to solve the child behavior problem confronting him. Nevertheless, a theme is difficult to define precisely. We have tended to think of a theme as a middle-ground construct intermediate in level between the idea of concern over a "symptom" or the "presenting problem" and the concept of "unfocused anxiety". For those who seek greater clarity on this point, reference may be made to the primary themes listed in Table 51. The consultant identified the primary theme for each session.

Table 50

Means of Rated Degree of Emotional Handicap (Bower's Scale) Compared Across Frequency of Consultation Groups Within Communities

Consultation Frequency Group	Community A		Community B	
	N	Mean Bower Rating	N	Mean Bower Rating
1 Consultation	40	3.18	31	2.97
2 Consultations	40	3.03	28	3.16
3-5 Consultations	50	3.06	30	3.20
6 or more Consultations	40	3.11	23	3.47
		F = .18		F = .96
		P = .91		P = .59

Table 51

Fifteen Most Frequently Identified Themes

Ranked by Frequency of Occurrence

Rank	Frequency	Theme
1	73	Teacher asking for support of consultant to carry out a decision already arrived at--*i.e.*, transfer a child.
2	60	Acting-out or disruptive children--theme here is children who fight with other children, do not keep in line, push, etc. It is related to the teacher's inability to tolerate any acting-out behavior. It is different from children who straight do not mind the teacher.
3	56	Parental neglect--here include such things as a working mother whom the teacher believes "should be at home with her children"; also parents who ignore or do not immediately heed communications from the teacher. Included here also are parents who do not seem interested in their children's progress.
4	54	Underachieving children--include here children who "have the ability but will not try". Also children who will not go to college or are not motivated in the middle-class achievement ethnic. The theme is generally a discrepancy between ability and achievement. Note: This is not lack of emotion.
5	52	Role threat to consultee. This can be a teacher, principal, janitor, P.E. instructor, special education instructor, etc.

Table 51 (continued)

Rank	Frequency	Theme
6	47	The teacher is saying--I'm not sure what this behavior means--please help me understand and resolve my own uncertainties.
7	34	The problem of intelligence--inability to adequately accommodate children whose intelligence is below average but not in the retarded range.
8	28	Children who do not "mind". These children are essentially disciplinary problems who do not obey the teacher's orders.
9	27	Use of consultant for own psychiatric or emotional problems--the presenting of the problem of the client soon is lost in the teacher's presentation of own problems, overtly or covertly.
10	25	Withdrawn child or social isolate--this reflects teacher's concern with a child that "cannot be reached".
11	24	Concern with "underdog" or social misfits--need to be needed on part of teacher; goes beyond appropriate role in "helping".
12	22	Broken home--the consultee seems to reflect that the child's home background, i.e., divorce, separation, has something to do with the presenting problem.
13	22	Conflict with school authorities--the theme is one in which the teacher indicates disagreement with the school principal, school philosophy, etc.

Table 51 (continued)

Rank	Frequency	Theme
14	20	Use of consultant for advice on problems of teachers. This includes adjustment, efficiency rating, how to dump one, etc.
15	20	Teacher concerned about role, mostly because she is new--uses specifics which are rather simply solved to indicate general anxiety about effectiveness as a teacher.

Table 51 shows the 15 most frequently occurring themes in the rank order of their frequency of occurrence. In the judgment of the consultants who made the theme identifications, the most obtrusive theme was that representing the teacher's seeking of the consultant's confirmation in pursuing a decision already made. Following relatively closely were three themes relative to children or their families, *i.e.*, "acting out children", "parental neglect", and "underachieving children". Since one primary theme could be identified for each of 1070 consultation sessions, the 15 themes shown in Table 51 accounted for 52.7 percent of the total themes, and the first four in Table 51 accounted for 22.7 percent of the total themes. Thus, if our experience is representative of the range of concerns raised by elementary school personnel, then it would appear that the issues with which a consultant is confronted are restricted to a relatively few basic ones.

Messages. As noted earlier in this report a "message" is a class of response made by a consultant to a "theme" presented by a consultee as the focus of his concern in the consultation session. The purpose of the message is to reduce the theme presented by the consultee and to enable the consultee to cope more effectively with the problem he presents thematically.

Table 52 presents the ten messages employed 20 or more times by the Child Behavior Consultants in their consultation sessions with teachers. In first rank is the message that child behavior can be understood with sufficient information about underlying factors. In the middle frequency range of usage are such messages as imply reassurance ("Keep up the good work."), supportiveness ("This is a problem. Keep me posted."), or the need for the teacher to make use of other pupil personnel resources in the school system--nurses, speech therapists, _et al_.

Differences Among Frequency of Consultation Levels

Did those teachers who consulted different numbers of times vary in the factors measured by the several instruments developed in this Project? In effect, this question asked whether or not it might be possible to predict differential frequency of consultation from other measures. In order to answer the question, teachers in the two project communities were divided into five consultation frequency levels and were then compared by single classification analyses of variance on the subscales of all the instruments except DOTO. Separate analyses were made for the two project communities. The five levels of consultation frequency were as follows:

I. Non-Consultees
II. 1 Consultation
III. 2 Consultations
IV. 3-5 Consultations
V. 6 or more Consultations

Table 52

Ten Most Frequently Employed Messages in Consultations

Rank	Frequency	Message
1	78	Most behavior of children is comprehensible if we can only understand some of the underlying factors. This is not easy to do. But if we have more information, it becomes easier.
2	63	Respect for integrity of the child as a human being. Message here has the contents such as "despite all the troubles, this child is showing he still needs you very much", or "with all this trouble, it is easy to see how important you are to this child".
3	62	Acceptance of limits of parents. Some parents find it difficult to work cooperatively with the teacher. The problem is trying to get their cooperation and for the teacher to understand and accept the limitations of such parents.
4	50	This is really a problem. Keep me posted. We both need to think about this, etc. (Standard "hooking" message).
5	50	Keep up the good work. You are getting results, continue with what you are doing, but don't be alarmed if the child regresses occasionally. This is to be expected.
6	41	Use of resources. Sometimes within the school system there are nurses, speech therapists, psychologists, etc., who can help with a problem. The teacher should make use of these.
7	39	Variable control of pupils. Some children respond better to one type of control rather than another. The problem of control can sometimes occupy much of a teacher's time.

Table 52 (continued)

Rank	Frequency	Message
8	30	Fair pupil evaluation. It's sometimes difficult to look at each child and evaluate him fairly. There are many factors that get in the way.
9	25	Use of school resources. Very frequently a discussion of problems with other teachers and with the principal indicates that the problem is not unique to this teacher or to the client.
10	20	A person often meets discouragement and disappointment in trying to do what seems right, but he continues to do an important job the best he can.
	N = 458	

Needs for Assistance

Of most immediate interest, because manifest needs for help should be related to seeking aid, is the possibility that those who consulted more and less frequently may also have differed on the factor-scales of our *Needs for Assistance Inventory*. The pertinent results appear in Table 53.

The results presented in Table 53 do not provide encouraging support for the notion that differential frequency of consultation is related to self-reported "needs for assistance" in dealing with the problems of children. In one instance, in project Community A, a significant difference occurred in the need for help in dealing with children's psychosomatic difficulties. This appeared to result from the lower score (*higher* need level) manifested by the highest consultation frequency group. However, the overall impression to be gained from Table 53 is that differences in needs for help in dealing with children were *not* reliably associated with differences in the frequency of consultation.

Table 53

Comparisons of Teachers' Frequency of Consultation Groups on Subscales of the Needs for Assistance Inventory

Community and Need Scale	Consultation Levels and Mean Scores						
	Non-Con	1 Con	2 Con	3-5 Con	6+ Con	F	p
Community A	(N = 13)	(N = 7)	(N = 10)	(N = 12)	(N = 9)		
Behavior and Learning Problems	67.5	65.1	62.4	64.9	55.6	2.02	.11
Psychosomatic Difficulties	36.2	34.4	33.3	36.8	22.4	4.21	.01
Community B	(N = 28)	(N = 7)	(N = 9)	(N = 23)	(N = 8)		
Behavior and Learning Problems	69.4	69.4	64.4	63.0	67.8	.98	.58
Psychosomatic Difficulties	35.0	26.7	34.0	31.4	35.0	.86	.51

Behavior Classification Check List

It will be recalled from Chapter V that the Behavior Classification Check List was devised to assess the degree to which a teacher was sensitive to, or "irritated" by, various types of behavior shown by school children. Do teachers who consulted more and less often differ in their scores on the three subscales of the Behavior Classiciation Check List? The results pertaining to this question appear in Table 54. As may be seen from Table 54, significant differences were observed across frequency of consultation groups on two BCCL scales in Community A, but no significant differences occurred on BCCL scales for Community B teachers. No adequate explanation exists for the fact that BCCL differences were found for the teachers in one community, but it is important not to generalize the findings since they were not replicated in the second community. Insofar as the BCCL differences shown in Table 54 are interpretable, however, it appears that they are mainly accounted for by the lower sensitivity (higher mean scores) of those who consulted only one time on two scales of the instrument, (a) dependent behavior and (b) rebelliousness and hostility.

Table 54

Comparisons of Teachers' Frequency of Consultation Groups on Subscales of the Behavior Classification Check List

Community and BCCL Scale	Consultation Levels and Mean Scores						
	Non-Con	1 Con	2 Con	3-5 Con	6+ Con	F	p
Community A	(N = 13)	(N = 7)	(N = 10)	(N = 12)	(N = 9)		
Vulgar Non-Conformity	92.2	74.1	94.9	84.4	86.8	2.31	.07
Dependent Behavior	28.2	38.3	28.1	24.8	23.0	4.36	.00
Rebellious Hostility	34.4	51.1	30.2	42.5	37.4	4.07	.01
Community B	(N = 28)	(N = 7)	(N = 9)	(N = 23)	(N = 8)		
Vulgar Non-Conformity	84.3	84.3	82.3	86.9	67.6	2.22	.08
Dependent Behavior	25.4	24.9	26.7	28.0	21.0	1.17	.33
Rebellious Hostility	41.8	41.9	43.6	43.4	53.8	1.56	.19

Other Instruments

Analysis of variance comparisons, similar to those reported on immediately above, were made on the scales of (a) the Child Attitudes Survey; (b) the Ideal Pupil Check List; (c) the School and Community Survey; and (d) the items of the Autobiographical Data Form. These analyses showed no significant differences among consultation frequency groups of teachers in either project community and, therefore, will not be discussed further.

Conclusions

It is apparent from the results presented and others mentioned in this section that very few significant differences were observed among differential frequency of consultation groups of teachers. The very few differences found did not provide any important illumination concerning why some teachers consulted very little or not at all while others were relatively frequent users of the service.

Teachers' Opinions About Consultation

An Assessment of Consultation Service questionnaire was administered in May 1966 to the teachers in the demonstration schools. This questionnaire appears in the Appendix. The purpose of the questionnaire was to sample the opinions of and knowledge about the consultation service held by the population of its consumers. This section will present various results obtained from the questionnaire data. The numbers of responses varied somewhat from question to question since not all of the teachers responded to all of the items.

Knowledge of the Consultation Service

All teachers were asked, by questionnaire (Item 1), whether or not there was a Child Behavior Consultant in their school. In Community A schools 209 (99 percent) of 212 respondents indicated knowledge of the service. In Community B schools 171 of 174 respondents (98 percent) knew of the availability of consultation. In Community A schools 201 of 212 respondents (95 percent) reported having met the consultant personally while 160 of 176 teachers (91 percent) in Community B schools had met the consultant. One hundred ninety-three of 212 Community A teachers (91 percent) correctly reported the consultant's name; 150 of 176 Community B teachers (90 percent) knew the consultant's name sufficiently well to report it correctly. It is apparent, therefore, that the consultants and their services were well known to the potential consumers of their services.

Accessibility of Consultation

Data reported earlier in this document showed that our records indicated that, on the average, across schools and project communities, some 80 percent of teachers had utilized the consultation service. This is surely one index which indicates that accessibility of consultants must have been rather easy. But another way to assess this accessibility was to ask the teachers about it directly. This was done in items 6, 8, 9 and 13 of the Assessment of Consultation Service questionnaire. In response to Item No. 6, asking each teacher how often he had consulted, 68 percent of 204 teachers in Community A schools indicated they had used the service between one time (12 percent) and seven or more times (9 percent). In Community B schools, however, only 48 percent of 164 respondents reported having used consultation between one time (12 percent) and seven or more times (6 percent). These figures are generally lower than the percentages of teachers for whom we accumulated Consultation Report Forms, and this may indicate a difference between what teachers and CBCs considered to be a consultation session.

Item No. 8 asked teachers directly concerning the ready availability of the CBC when they wanted to consult. Eighty-two percent of 141 teachers in Community A schools and 83 percent of 87 teacher respondents in Community B schools indicated that the CBC had been readily or "usually readily" available. In Community A schools 3 percent, and in Community B schools 5 percent, reported difficulty in making an appointment with the CBC. In response to Item No. 9, which asked teachers whether or not they had difficulty finding free time for consultation, the bulk of respondents (77 percent of 143 in Community A; 61 percent of 87 in Community B) reported no difficulty or only "occasional" difficulty. On the other hand, 18 percent of these respondents in Community A and 34 percent in Community B reported that it was "usually" difficult or "almost impossible" to find the necessary free time.

Of those teachers who reported themselves on Item No. 13 to be non-consultees (72 in Community A; 89 in Community B), relatively small proportions (9 percent in Community A; 12 percent in Community B) reported their failure to consult to be due either to the CBC's schedule being too full or too difficult in finding free time. Most of these self-regarded non-consultees, *i.e.*, 61 percent of 72 cases in Community A and 57 percent of 89 in Community B, reported their failure to use consultation as being rooted in the absence of "real problems that needed discussion".

Opinions on the Usefulness or Helpfulness of Consultation

One hundred forty-three teachers in Community A schools and 87 in Community B responded to the request (Item 10) to judge the usefulness of the consultation service to them. In Community A 80 percent, and in Community B 72 percent, of the respondents classed consultation as "helpful", "very helpful", or "extremely helpful". This means, then, that 20 percent of Community A respondents and 23 percent of Community B respondents

4

were "uncertain" or "doubtful" of the value of the service or labeled it of "no help at all" (3 percent in Community A; 7 percent in Community B). Item No. 11 asked teachers to describe verbally how the consultant had been helpful. A sample of teachers' responses is presented in Table 55. These should be regarded as illustrative rather than as representative, but they convey, perhaps, something of the "flavor" of the teachers' reports on how the CBCs were helpful. Questioning, reviewing data about children, making suggestions, listening, discussing a case, and confirming teachers' judgments were among the ways in which the consultants were perceived as being helpful. The "complaints" of teachers concerning the lack of helpfulness of consultants, registered in response to Item No. 12, are sampled in Table 56 and indicate that in some instances CBCs were seen as lacking pertinent knowledge (*e.g.*, medical), failing to make suggestions or making inapplicable ones, being too general in discussion, lacking awareness of classroom problems, and as being handicapped by not working directly with the child.

Table 55

How Has CBC Been Helpful?

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1. "Nurse participated--made home contact--child's behavior (and weight) improving some."
2. "The child has been reacting differently now--participates in games and in classroom."
3. "In talking to her (the CBC) and looking over his work, I realized there *had* been improvement."
4. "We discussed his folder--the information we had--together and how best to treat him."
5. "He (CBC) has asked questions, which, when trying to find the answers, has opened new avenues."
6. "Suggested ways of obtaining more information relative to home situation."
7. "He has made very helpful suggestions as to things I do with individual pupils--these have usually worked well"!
8. "He made suggestions about pupils I discussed with him, and after following them, I have noted more confidence in my pupils."
9. "After discussing the problem my thoughts seemed completely rearranged and not so muddled. He also gave a few suggestions."
10. "Confirmed my judgment about the problem."
11. "Good variety of solutions for me to try. One worked"!
12. "She listens! Then she makes suggestions. She is tops"!

Table 56

Why Has CBC Not Been Helpful?

1. "Did not suggest new methods of correction."
2. "I...have a problem with my own child. The CBC does not know enough of medical aspects to answer. School nurse is more helpful."
3. "Some suggestions have not been applicable to my class (mainly Latin American)."
4. "I've had no difficult discipline problems."
5. "He spent too much time beating around the bush. No problems were met head-on. I could have carried on my own efforts in the time I spent with him."
6. "Just discussion in general--no specific suggestions."
7. "Unaware of basic classroom problems."
8. "I feel that consultants should meet the child and work closer to the problem."
9. "When I consulted him the child had recently been to see a social worker."
10. "He has not helped in solving the conduct problem."

Essentially the same sorts of feelings were noted by the teachers who responded to Item No. 16 of the Assessment Questionnaire, regarding the strengths a CBC should have, as were expressed in response to Item No. 12 wherein responses presumably indicated consultants' deficiencies. The responses to Item No. 16, sampled in Table 57, indicated that teachers wanted a variety of characteristics in their CBCs -- more medical knowledge, bilinguality, a full-day schedule, more classroom experience, direct work with children, etc. At the same time, many teachers' responses were quite complimentary to the CBCs with whom they had had experience, and this is reflected in the illustrative sample of responses recorded in Table 57.

Table 57

Strengths the CBC Should Have

1. "Only more time on my part might increase the value...it might be better if the consultant were bilingual."
2. "If consultant would see children directly it would help."
3. "I think the consultant should work with children, not just with the teacher."
4. "More medical knowledge."
5. "From talking...informally with (CBC) it is my opinion that (CBC) is very capable and has an adequate understanding of his job."
6. "More experience observing or teaching in classroom."
7. "Knowledge of immediate surroundings--bi-racial and environmental, to further understand...the Negro child and teacher."
8. "Psychology background...not pass the buck."
9. "We need someone like (CBC) more often."
10. "All day schedule would help...."
11. "More experience with children."
12. "(CBC) is a very fine one--there couldn't be a better consultant."
13. "I am very pleased with the present consultant."
14. "(CBC) is excellent"!
15. "I don't feel another person would be more helpful. (CBC) has and is performing a very valuable service to our school...."

The teachers in the schools of both project communities were asked to indicate (Item No. 14), even if they had not used the consultant, how helpful they believed the service had been, in general, to the school. In Community A schools, 70 percent of 154 respondents rated the service from "helpful" to "extremely helpful" while 30 percent of the teachers rated it from having "uncertain" value to being of "no help at all". In Community B schools, 61 percent of 137 teachers answering the item said the service was somewhere from "helpful" (29 percent) to "extremely helpful" (9 percent). Thirty-nine percent of 137 Community B teacher respondents rated the service as having between an "uncertain" (31 percent) value to no value at all (1 percent). Generally, it appears, teachers who answered the item tended to endorse the service as performing a helpful function in the school.

General ratings of the helpfulness of a service provide little insight into the ways in which it may have been helpful and so, really, do such illustrative comments as are reported in Tables 55 and 56. It was considered that a somewhat more objective picture could, perhaps, be gained by presenting teacher respondents with a list of functions with which a CBC might offer assistance. Respondents were asked to indicate, by marking with a "1", those 4 of 13 with which the consultant was "most helpful" and, by marking with a "3", those functions with which the CBC was "least helpful". In this way, in effect, a rating of "1" (most helpful), "2" (moderately helpful), or "3" (least helpful) was assigned by respondents to each of the 13 functions presented to them in Item No. 17 of the Assessment Questionnaire. These ratings could then be averaged across respondents to give some picture of the functions which were generally seen by them as having been most and least helpfully performed. The results obtained in this manner are shown in Table 58.

Table 58

Mean Helpfulness Ratings for Thirteen Helping Functions Given to CBCs by Teachers in Two Project Communities

Helping Function	Mean Ratings Community A N = 139	 Community B N = 96
1. Identifying problems in children	1.34	1.56
2. Understanding problems of children	1.14	1.26
3. Increased knowledge of behavior and emotions	1.43	1.37
4. Confirmation of teacher's judgments	1.50	1.26
5. Help with understanding test results	2.10	2.53
6. Better knowledge of resources	2.68	2.35
7. Helping to a more realistic view of children	1.88	2.00
8. Helping to a more realistic view of self	2.66	2.64
9. Suggestions for talking with parents	1.93	2.24
10. Ideas discussed with other teachers	2.73	2.42
11. Better communication with principal and others	2.92	2.91
12. Better understanding of classroom problems	2.03	2.39
13. Helping to better understand school's limitations in helping a child	2.66	2.37

In general, the results in Table 58 show that teacher respondents in the two project communities agreed that the CBCs were most helpful in (1) identifying children's problems; (2) promoting understanding children's problems; (3) conveying greater knowledge of human behavior and emotions; and (4) confirming the judgments made by the teachers. The common functions in which consultants were seen as "least helpful" were (1) enhancing communication with the principal and others about children; (2) providing ideas which were discussed with other teachers; (3) helping the teacher toward a more realistic view of self.

Finally, teacher respondents were asked on the Assessment Questionnaire (Item No. 18) to rank, from "1" (most valuable) to "9" (least valuable), nine pupil personnel service specialties in terms of their usefulness in helping children derive the greatest possible benefit from their schooling. The mean rankings assigned by 199 Community A respondents and by 129 Community B teachers are shown in Table 59. Apparently several pupil services were rather more highly valued, on the average, in both Community A and Community B schools, than was child behavior consultation at the time when the consultation service had been in effect for two school years.

Table 59

Mean Rankings of Nine Pupil Personnel Specialities by Demonstration School Teachers

Pupil Personnel Specialty	Mean Rankings Community A	Mean Rankings Community B
1. Special education teachers	3.05	3.63
2. Speech clinicians	4.15	5.09
3. Counselors	4.48	4.75
4. Nursing services	4.69	5.32
5. Psychological or psychiatric services	4.89	5.48
6. School social workers	7.43	3.90
7. Medical services (physicians)	7.78	6.13
8. Consultation service	5.04	6.02
9. Remedial reading specialists	3.24	4.17

CHAPTER VIII

SUMMARY AND CONCLUSIONS

This demonstration and research project grew out of the concern of the Interprofessional Research Commission on Pupil Personnel Services (IRCOPPS) for preventing hampering mental health disturbances in children. Our approach to this concern has not been that of providing direct services, diagnostic and clinical, to pupils in school. Instead, we have attempted to test out an alternative to direct services, namely, sustained consultation about children with their teachers in the elementary school. The goal of child behavior consultation, where the school is concerned, is to modify the perceptiveness of school personnel, especially elementary school teachers, and, thereby, to enable them to become more effective preventive workers relative to the mental health of children. If it could be shown that child behavior consultation produced measurable desirable changes in teachers' orientations to children, it was believed that grounds would exist for thinking of consultation as a valuable adjunct function to be engaged in by appropriately trained pupil personnel workers in schools.

Conceptual Model

The present study began with an effort to conceptualize how it could be that child behavior consultation supplied to elementary school teachers might be expected to make a difference in their orientations toward children. It was proposed initially that variations in the measured preventive mental health orientations of teachers could be explained, or predicted, in terms of variations in (1) their degree of utilization (*i.e.*, the quantitative "press") of child behavior consultation services; (2) specific personal and professional readiness factors, such as the teacher's level of prior training or his manifest (self-reported) needs for help in dealing with certain classes of child behavior problems; (3) the system of role expectations held by teachers relative to other school professionals and self; (4) certain operative institutional environment factors, such as teachers' perceptions of the goals and morale of the school. The basic *proposition*, then, was that *changes* in the mental health promotion orientations of a teacher would be a function (f) of his *utilization* of consultation (U_c), his *readiness* (R_p) to profit from consultation, the ways he *defines his role* ($D_{p.o}$) relative to other school professional roles, and his *perception of the* dimensions of the institutional *milieu* (M_p).

General Design of the Project

The present action research project was designed, in the first place, as a quasi-controlled experiment. This means that, in order to assure that there would be at least two levels of consultation utilization by teachers, certain schools in two Texas Communities, "A" and "B" were designated as "demonstration" (or experimental) schools and certain other schools in each community were designated as "comparison" (or control) schools. The major difference between the demonstration and comparison schools was that the teachers in the demonstration schools were provided with child behavior consultation services for a two-year period while such services were withheld from teachers in the control schools. There were 8 demonstration and 8 comparison schools in Community A and 6 demonstration and 6 comparison schools in Community B. The selection of schools as demonstration and comparison schools respectively was accomplished through careful and lengthy consultations with the superintendents of the school districts and their directors of pupil services. This mode of selection of schools was intended to assure that the demonstration and comparison schools would be as similar as possible in the kinds of populations from which they drew their pupils and in the composition of their faculties. It should be understood, however, that schools as such were not the units of direct interest to us. Instead the sets of teachers in the schools constituted the subject population in the experiment--those in demonstration schools were offered child behavior consultation services while those in comparison schools had no access to these services.

It was expected that the personnel in demonstration schools would change significantly more, across time, than those in comparison schools on the scales of our basic criterion instrument, Dimensions of Teachers' Opinions (DOTO), described below, and that such changes could, therefore, be subjected to meaningful prediction analyses by multiple linear regression or other multivariate methods. Therefore, in addition to DOTO, a battery of other devices was administered to the teachers in the early autumn of 1964. These devices were intended to measure factors related to our conceptual model (described above) as independent or moderator variables upon which criterion change (difference) scores were hypothesized to be dependent among demonstration school teachers. Generally, these instruments (described in Chapter V) were designed in the hope of measuring aspects of background, "readiness", role definitions, and milieu perception as required by our basic paradigm (*cf.*, Chapter II).

Criterion Measurement

If one introduces a treatment factor into an experimental group of subjects with the expectation that it will produce significant change over and above that observed for a group of control subjects, it is necessary that the factors in which change is expected be susceptible to measurement in both groups. In this Project two criterion instruments were developed and employed. The first and primary device, Dimensions of Teachers' Opinions (DOTO) was developed mainly by factor analyses (image method) of elementary school teachers' responses to a 110-item self-report inventory. The basic factor analytic and standardization studies were performed using data for 621 Minnesota elementary school teachers, but the same analyses confirmed the Minnesota factor scales for the teachers in the two Texas project communities. In addition to DOTO criterion factor scales, the instrument also contains a 25-item scale labeled "APA-Preferred Responses", which was developed by comparing the responses, item by item on an early form of DOTO, of 145 Fellows of the American Psychological Association with those of 205 Texas elementary school teachers. It was our hypothesis that teachers who experienced the most consultation, whether as between demonstration and comparison schools *or* within demonstration schools alone, would differ on the factor-analytically based scales of DOTO as well as on the APA-Preferred Responses scale. The names and corrected split-halves reliabilities (N = 1344) of the DOTO scales are as follows:

	Reliability
1. Permissive *vs.* Authoritarian Orientation Toward Children	.88
2. Sophisticated *vs.* Naive Management of Child Behavior	.91
3. Superficial *vs.* Informed Concepts of Mental Health	.75
4. Direct Efforts to Help Children *vs.* Ignoring	.57
5. APA-Preferred Responses	.76

The intercorrelations among these scales were moderate, ranging from -.05 to .60 with a median value of .36.

A second set of three factor analytically based criteria were provided by the Consultation Report Form (CRF). This form, consisting of a large number of 9-point rating scales, was filled in by each CBC following each one of what he considered to be his consultation sessions. Eleven first-order CRF factors were reduced to 3 second-order factors by scoring them as eleven summed scales, determining the intercorrelations among the eleven, then performing principal axis extraction and analytic varimax rotation. The three resulting CRF factors (*cf.*, Chapter IV) were named:

Factor I: "Consultee's Concern and Helping *vs.* Non-Involvement with Child Client"

Factor II: "Consultee's Rapport with and Receptiveness to Consultant"

Factor III: "Consultee's Relationship with Client and Judgment of Client's Disorder"

To assess the reliability of CRF ratings, an experienced CBC accompanied three other CBCs on 23 consultations and prepared a CRF which could be compared with that of the other CBC on 39 individual scales of the CRF. The CRF inter-rater correlations for these 23 paired consultations ranged from .42 - .90 with a median value of r = .66. While not impressively high, this degree of inter-rater reliability seemed, on the average, to be at least minimally satisfactory.

It should be remembered, of course, that the names ascribed to DOTO or CRF factors can only crudely describe their content. They should be understood, generally, as simply being collective labels for the items or rating scales which they subsume. Nevertheless, in the development of criterion and predictor scales in a demonstration-research endeavor such as the present one, few alternatives to factor analysis readily present themselves.

Hypothetical Predictor Variables

The present Project centered about a paradigm which proposed, essentially, that criterial (or "output") changes would be produced by child behavior consultation, as intervention, and that such changes (or differences) would be predictable on the basis of differential frequency of using consultation and on other factors already discussed in terms of our conceptual model (*i.e.*, readiness, personal history, role definitions, and perception of the school milieu). Obviously, we could not be in any position to test this proposition empirically unless we developed devices to assess or measure these sorts of variables. In consequence, a great deal of project effort--eventually found to be essentially futile--was devoted to attempting to construct, primarily by factor analysis, measures of these hypothetical predictor factors.

The Autobiographical Data Form (ADF)

This is an objectively answerable device designed to survey, in 77 items, various facets of the potential consultee's life history and present circumstances--childhood family relationships, items of socioeconomic background, school experience, academic performance, *et al*. Attempts to factor analyze the ordinal or quasi-interval items of the ADF yielded no meaningful solutions, so any use of the instrument would need to consider individual items of the ADF.

The Needs for Assistance Inventory (NAI)

Self-reported "needs for assistance" in dealing with various kinds of child behavior (*e.g.*, rebellious behavior, shyness, discipline *et al*.) were considered, at the outset of the Project, to be one aspect of the *readiness* of a teacher to change under the press of consultation. Hypothetically, those with stronger needs for assistance were expected to be among the more frequent consultees and it was expected that needs for assistance would predict criterion change significantly (or be differentially associated with criterion change). While the NAI was composed by project staff of items representing many classes of child behavior, image-type factor analysis of 50 inventory items yielded only two empirical scales. These apparently measured "needs for assistance" in dealing with

	Reliability
1. Behavioral and Learning Problems	.92
2. Somatic Difficulities	.87

Behavior Classification Check List (BCCL)

Manifest needs for help in working with various classes of child behavior could represent, conceptually, one facet of a school person's readiness for consultation and change, but another facet of his readiness might be thought of as the teacher's sensitivity to, or tendency to be "irritated by" some kinds of child behavior more than by others. Ninety-two items were compiled by the project staff to which teachers were required to respond on 5-point scales whose polar response alternatives were "Highly Irritating" and "Not at all Irritating". While the items were intended to encompass a wide variety of behaviors, image-type factor analyses yielded evidence for only three factor-based scales, named:

		Reliability
1.	Vulgar, Aggressive Non-Conformity	.94
2.	Dependent Ingratiating Behavior	.81
3.	Rebelliousness and Hostility	.92

Ideal Pupil Check List (IPC)

It was our view of things in pursuing this Project that a part of a teacher's readiness to utilize consultation and to change under its press consisted of his conception of the kind of behavior which children should ideally develop and manifest. Such concepts, in the elementary school, perhaps represent goals which teachers hold for children and which, however skillfully or awkwardly, they strive to realize in their relationships with children.

In order to assess each potential consultee's conceptions of what constitutes desirable child behavior, we administered a 66-item adjective check list, "What Is An Ideal Pupil?". Our approach to developing scoring scales for the IPC has been the same as that used in scaling our other instruments, namely, image-type factor analysis. By this method, three item-factor scales were developed for the IPC. These were named as follows:

	Reliability
1. Autonomous Pupil	.82
2. Negativistic, Critical Pupil	.79
3. Conforming, Obedient Pupil	.60

Child Attitudes Survey (CAS)

Another facet of teacher readiness for consultation and change was considered to involve beliefs about the causes of child behavior. We sought to measure these beliefs of teachers using a Child Attitudes Survey (CAS) which, though short, resembles various others that have appeared in the literature. Image-type factor analyses of the CAS for various teacher groups led us to identify two factor-based scales in the CAS, namely:

	Reliability
1. Environmental Control of Child Behavior	.82
2. Hereditary Causation of Child Behavior	.80

Milieu Factors: School and Community Survey

At the outset of this Project we held the view that teachers should differ in their response to consultation as some function of their perceptions of their school environments. For example, we considered that teachers whose view of the school was one which held that administration was effective and morale strong would have been most likely to use and "benefit" from consultation. To measure teachers' perceptions of the school milieu, then, we developed a self-report *School and Community Survey* -- a 50-item device, each item of which a respondent answered on a 5-point "agree-disagree" continuum. Image-type factor analysis permitted the development of three factor-based scales for the instrument:

	Reliability
1. Effective Administration and High Morale	.87
2. School's Emphasis on Intellectual Activity and Character Development	.74
3. Teacher Discouragement and Cynicism	.75

Professional Role Expectations Inventory

It will be remembered that the conceptual model with which we began asserted that changes in teachers, consequent to consultation, should be related to the teacher's view of who bears responsibility for a variety of educational tasks in the school (*e.g.*, "Develop a complete case study of a problem pupil"). An attempt was made to develop a forced choice Professional Role Expectations Inventory to measure the extent to which responsibility for school tasks was ascribed to each of seven school functionaries (e.g., teacher, counselor, principal, et al.), but the effort was unsuccessful. The reliabilities of the role scales proved to be too low for satisfactory use (i.e., range .10 - .63, median = .51). Beyond the low reliabilities, however, it was ultimately realized that the instrument should have been scorable for classes of school tasks as well as for roles. In consequence, we were forced to discontinue use of the Professional Role Expectations Inventory.

Results

The general design of this Project was outlined earlier in this Chapter. It will be recalled that, at root, the design was that of a quasi-experimental study in which teachers in demonstration (or "experimental") schools, receiving consultation, were to be compared with teachers in comparison (or "control") schools. If significant criterial differences were found between demonstration and comparison school teachers, it would be deemed appropriate to test our full conceptual model empirically by resorting to multiple linear regression analysis in which the hypothetical predictor variables described above would be related to DOTO change scores for teachers in the demonstration schools. So, in presenting our results, the first and most basic question to be answered is that which asks if demonstration teachers were found, after some period of consultative intervention, to differ from the teachers in the comparison schools on the five criterion scales of DOTO. It had been initially demonstrated (*cf*., Table 24) that no significant differences existed between demonstration and comparison school teachers at the beginning of the experiment.

The experimental hypothesis obviously was that consultation, viewed as treatment, should have produced significant change in demonstration school personnel over and above any change occurring in the personnel of comparison schools. This hypothesis was tested by analysis of variance procedures using five DOTO scales as measures of the dependent variables. These analyses were applied to repeated trials (*i.e.*, testings) with DOTO. Schematically considered, these analyses were made according to the following general design format.

Design Format

	Comparison Schools	Demonstration Schools
Time 1 - Fall 1964		
Time 2 - Fall 1965 or Spring 1967		

Analyses made according to the foregoing general design format revealed that no significant differences occurred on DOTO scales, as between demonstration and comparison school personnel in either project community, over either the first year of the experiment or the two years of total consultative intervention (*cf*., Tables 25-34).

Change in Teachers Within Demonstration Schools

It was conceivable that expecting differences to occur in DOTO scores across demonstration ("experimental") and comparison ("control") schools as a function of the availability or the non-availability of consultation for two school years was unrealistic. After all, aside from the fact that no teachers in the comparison schools had access to consultation, it was true that some proportion of teachers in the demonstration schools did not use the service. This meant, in effect, that there was differential utilization of consultation within demonstration schools. Thus it could be hypothesized that differential use of consultation should be associated with differences in DOTO scores within demonstration schools. This hypothesis was examined, by analysis of variance procedures, in essentially the same manner as was the hypothesis that demonstration school personnel should differ from comparison school personnel on the pertinent scales of DOTO. This is to say that a "groups" (N of consultations) by "trials" (times of testing) design was employed according to the following general format.

Design Format

Level of Consultation	Non-Cons.	1 Con.	2 Con.	3-5 Con.	6+ Con.
Time 1 - Fall 1964					
Time 2 - Fall 1965 or Spring 1967					

Analyses made of teachers DOTO scale scores in the demonstration schools of the two project communities separately showed *a lack* of statistically significant differences of a sort which would support the hypothesis that differential frequency of consultation was associated with pertinent differences in DOTO scale scores (*cf*., Tables 35-44).

Changes on CRF Factors

It will be recalled that, in addition to DOTO as a criterion device, a *Consultation Report Form* (CRF) was devised upon which consultants recorded, as ratings--usually on 9-point scales, their impressions of the detailed character of each consultation session. Many of these individual rating scale items were factor analyzed to reduce them to three second-order rating factors, the names of which were given earlier in this Chapter. Generally, Factor I had to do with the consultee's concern for and helping orientation toward the child; Factor II seemed to indicate the consultee's rapport with the consultant; and Factor III apparently was a complex indicator of the consultee's relationship with the child and of his assessment of the child's disturbance.

A sample of 54 demonstration school teachers for whom the three CRF factor scale scores could be derived, and who had consulted three or more times, was identified. The question asked of their data was: Did significant changes occur in the ratings assigned to the teachers on the CRF factors between the first and last consultation? The method of answering this question was an analysis of variance procedure, equivalent to a t-test for correlated observations. The first and the last CRF protocols for each subject were taken as the "trials" measures. The only factor on which a significant difference was found was Factor II -- Consultee-Consultant Rapport--indicating increased rapport over a series of consultations. The difference on Factor I, approached statistical significance ($P = .07$) in a direction such as to suggest an increase in the consultee's helping orientation toward the child as against "non-involvement".

The Prediction of Change in Teachers

The paradigm to which this project was linked from its inception held not only that change (or significant differences) could be produced over time in the child mental health promoting orientations of teacher-consultees, but, more crucially, that such changes would be predictable from measures of other teacher characteristics--biographical data, needs for assistance, idealized images of child behavior, tendencies to devalue ("be irritated by") certain types of child behavior, beliefs about the causation of child behavior, views of the school environment, and the like. But the evidence adduced in this investigation has been to the effect that (1) differences attributable to the consultation treatment were not observed in comparisons of demonstration with comparison school personnel, and that (2) within demonstration schools, measures of teacher's mental health promoting orientations (DOTO Scales) did not differ significantly as a function of the degree of utilization of consultation. Since, therefore, there appeared to be no measurable effect of consultation, it was deemed of no avail to present further analyses aimed at predicting DOTO changes for personnel within demonstration schools.

Other Results

The Extent of Consultation Utilization. Regardless of its efficacy or lack thereof in producing desired changes in teachers, it is apparent that the child behavior consultation service was widely used by teachers in the 14 demonstration schools. By the close of the Project's services in May 1966, 306 of 383 potential consultees, *i.e.*, 80 percent, had used the service one time or oftener. In Community A schools, teacher usage of consultation averaged 85.7 percent, while in Community B schools usage was made of consultation by 72.3 percent of the personnel. The range of usage was very wide--from zero to 22 consultations--

but the median number of consultations was two. Overall, our consultants reported on 1070 consultation sessions with teachers.

The Children Consulted About. The data we acquired concerning the children teachers consulted about were, of course, limited, because no direct work was done with the children and all information about them had to be gained, virtually incidentally, in the consultation sessions with the teachers. Of 845 children consulted about one or more times, 72 percent were boys and 28 percent were girls. Approximately 58 percent of the children consulted about were in grades 1-3, while the remainder were in grades 4-6. Thus, if early identification and prevention of child behavior problems are among the goals of consultation, it would seem desirable that somewhat more effort should be devoted to children in the earlier grades as it apparently was.

Our Child Behavior Consultants were instructed, during their training, in the preparation of ratings of each child consulted about on a 7-level scale of emotional handicap originally described by Bower (1959). These ratings were, of course, not based on a direct examination of the child, but upon the teacher-consultee's description of him. We are aware of the indirect and possibly illusory character of such ratings as these, but, approached cautiously, the data are of interest. Some 34.3 percent of 903 consultations centered about children who were judged to display "moderate" to "severe" behavior disturbances. This means that most (65.7 percent) of the child behavior problems brought to a consultant's attention appeared to be relatively minor ones, perhaps a hopeful augury for preventive effort. There was no evidence adduced to indicate that a child would be consulted about more or less frequently depending on the rated severity of his disorder, nor did the data indicate (*cf*., Table 50) that teachers who consulted more or less frequently differed in the average emotional handicap rating of the children consulted about.

The Content of Consultation. The "content" of consultation sessions was described, in this Project, in terms of "themes" and "messages". A "theme" was presumed to be the focus of the consultee's concern as reported by the consultant. The consultant's "message", given to the consultee, can be viewed as aimed at "theme reduction", *i.e.*, at increasing the consultee's latitude in perceiving and acting to solve the child behavior problem confronting him. In the judgment of the CBCs who made the theme identifications reported on the CRF, the most obtrusive theme was that representing the teacher's seeking of the consultant's confirmation in pursuing a decision already made. Following relatively closely in frequency were three themes relative to children or their families, *i.e.*, "acting out children", "parental neglect", and "underachieving children". Our data (*cf*., Table 51), if they are representative of the range of concerns raised by elementary school teachers, would appear to indicate that the issues with which a consultant is confronted are limited to a relatively few basic ones.

A "message" is a class of response made by a consultant to a "theme" presented by a consultee as the focus of his concern. The purpose of the message is to enable the consultee to cope more effectively with the problem he presents thematically. Among the messages purportedly used by our consultants, the first-ranking one was that "child behavior can be understood with sufficient information about underlying factors". In the middle range of frequency of use were such messages as implied reassurance and support and the need to make use of other resources, *e.g.*, school nurse, speech therapist, *et al.*

Differences Among Frequency of Consultation Groups. As has already been pointed out, significant criterion changes were not observed between demonstration and comparison school teachers nor between differential frequency of consultation usage groups. The subsidiary question arose, however, as to whether or not any of our instruments could distinguish among groups which consulted more and less frequently. If such differences existed it was considered that there might then be a basis for forecasting which teachers might be most and least likely to make extensive use of child behavior consultation services. Separate analyses of variance were made for the two project communities comparing five levels of consultation frequency. A very few significant differences were obtained (*cf.*, Tables 53 and 54), but the overall conclusion had to be that there was no firm basis in the data for distinguishing among consultation frequency levels. In other words, the very few differences found did not provide any important illumination concerning why some teachers consulted very little or not at all while others were relatively frequent users of the service.

Teachers' Opinions of Consultation

An *Assessment of Consultation Service* questionnaire was administered to all teachers in demonstration schools in May 1966 in order to sample their knowledge, opinions, and evaluations of consultation. The data indicated that the consultants and their services were indeed well known to the teachers--95 percent of teachers in Community A schools and 91 percent in Community B reported having met the consultant. Lower percentages in both communities reported having used the service than was indicated by our consultants' own reports of sessions actually held, but most teacher respondents indicated that they found the consultant to be reasonably accessible to them and that they could usually find free time for consultation. Most respondents who regarded themselves as non-consultees reported their failure to use consultation as being rooted in the absence of "real problems that needed discussion".

Asked to judge the worth of consultation services, responding teachers generally viewed them as "helpful", "very helpful", or "extremely helpful". Generally they listed helpful functions of the consultant as including making suggestions, listening, discussing cases, and confirming the teacher's own judgment. The "complaints" of teachers concerning the "lack of helpfulness" of consultants indicated that in some instances CBCs were seen as failing to make suggestions or making inapplicable ones, being too general in discussion, being handicapped by not working directly with the child, lacking pertinent knowledge (*e.g.*, medical), etc. While generally endorsing consultation as serving a helpful function in the school, teachers suggested a variety of qualities the CBCs should have, including bilingual fluency, freedom to work directly with children, greater medical knowledge, more classroom experience, and the like.

A list of 13 functions with which consultants might offer assistance to school personnel was presented to teachers and they were asked to rate the degree to which CBCs were helpful with each--*i.e.*, "1" (most helpful), "3" (least helpful), "2" (moderately helpful). In general, the results of this assessment showed that teachers saw CBCs as most helpful in (1) identifying children's problems, (2) facilitating the understanding of children's problems, (3) conveying greater knowledge of human behavior, and (4) confirming teachers' own judgments. The common functions in which consultants were seen as "least helpful" were (1) enhancing communication with the principal and others about children; (2) providing ideas which were discussed with other teachers; and (3) helping the teacher toward a more realistic view of self.

Finally, teacher respondents were asked to rank from "1" (most valuable) to "9" (least valuable), nine pupil personnel service specialties in terms of their usefulness in helping children gain greatest benefit from their schooling. The mean rankings (_cf._, Table 59) indicated that on the average, after two years of experience with the child behavior consultation service, the teacher respondents gave consultation a relatively low "value" ranking among available pupil personnel services. Special education teachers and remedial reading specialists received the highest value rankings while medical services by physicians received the lowest average rank.

Discussion

The results of this demonstration experiment do not require any elaborate discussion. By and large they are self-evident. The Project began with a consideration of the factors, including the utilization of consultation, that should be expected to affect the production of changes in the mental health facilitating orientations of elementary school teachers toward children. The Project was initiated in the fall of 1963 by beginning the development of needed measuring instruments and by undertaking the training of advanced graduate students in Educational Psychology and Psychology to function as Child Behavior Consultants. In the autumn of 1964, after careful preparation of the consultants and the demonstration schools where they would be stationed, the consultants were assigned to work, one-half day per week of consultation time, during 1964-65 and 1965-66. The service was widely utilized by teachers, our records indicating that some 1070 sessions were held in two years.

Despite the facts that the child behavior consultation service was widely used by the teachers in demonstration schools and that it was commonly believed to be helpful to teachers, no evidence was found that consultation made any measurable difference in the orientations (attitudes) of teachers toward children either (1) as between demonstration ("experimental") and comparison ("control") schools or (2) across differential frequency of consultation groups within demonstration schools. And because no evidence of consultation-related differences could be found, it was deemed meaningless to present change prediction studies.

Just why no significant changes related to consultation usage should have been found in this Project cannot be determined from the data available. One possibility to be entertained, and which should be tested in other investigations, is that different kinds of teacher change measures are needed. Perhaps some attempts should be made at a direct observational level to determine if teachers' overt ways of working with children do indeed change as a consequence of using consultation. Such methods are infinitely more costly than the use of self-report inventories, but they might be more revealing of the functional changes that consultation seeks to produce in care-givers. It is surely conceivable that changes in the overt functioning of teachers may precede by a considerable time the occurrence of basic changes in attitudes toward children. There may, indeed, be a little suggestive evidence for this point of view from the present Project, for it was found that nearly statistically significant ($P = .07$) changes occurred, as between first consultation and last consultation ratings (CRF), on a rating factor interpreted as measuring "Consultee's Concern and Helping _vs._ Non-Involvement with Child Client". But ratings are suspect measures at best and, in the present instance, may be doubly so since they were made by participants in the intervention, _i.e._, by the Child Behavior Consultants themselves. Better means of measuring consultee change are needed.

Apart from the possibility that our measures of teachers' general positive mental health orientations _vis a vis_ children may have been inappropriate, one must also entertain the related possibility that child behavior consultation, as we have practiced it, is a relatively "low power" technique not well adapted to producing the kinds of measurable teacher change which we have asked of it. Some more potent techniques of changing teachers' orientations may well be required if such changes are to be sought as precursors of functional changes in teachers' ways of working with children. It may be, however, that consultation can produce desirable changes, but only when a greater amount of it is provided and for a substantially longer period of time than was possible in this Project. Whatever the case may be, this report can close with the trite but appropriate comment that far more research will be needed before we can have any assurance that we know the effects or limitations of child behavior consultation as a means of modifying teachers.

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APPENDIX

THIS IS A SURVEY NOT A TEST. Form 12c

Dimensions of Teachers' Opinions

Teachers have a wide variety of experiences in the classroom which enable them to develop realistic knowledge and understanding of children. We recognize individual differences in teachers' opinions and attitudes about what affects children in school. We feel that your insights can be of inestimable value to teacher educators.

Your responses to the following items will permit us to discover how teachers think children are influenced by various classroom occurrences. There are no right or wrong answers to the items in this booklet. Our interest is in how teachers' opinions differ on the issue presented in this booklet.

Please indicate the degree to which you agree or disagree with each of the statements on the following pages by responding on the separate answer sheet. Please mark your answer to each item in the following way.

A--Agree rather strongly
B--Agree in general, but disagree in some specific instances
C--Undecided
D--Disagree in general, but agree in a few specific instances
E--Disagree rather strongly

Thus, if you "Agree rather strongly" with the item, blacken the space between the dotted lines under "A". If you disagree, blacken the space found under "E".

Example

1. Children should be seen and not heard.

A	B	C	D	E
===	===	===	===	▬

By blackening the space under the E you indicate you disagree rather strongly with the statement.

Please be sure you have responded to all of the items in this survey.

NOTE: PLEASE OBSERVE THAT IN ANSWERING ITEMS YOU PROCEED ACROSS THE ANSWER SHEET.

PLEASE USE A #2 PENCIL.

Please mark answers according to the explanations on the preceding page, from "A", agree, through "E", disagree.

1. In order to promote pupils' learning of self-discipline, a teacher should never lose emotional control nor speak in anger.

2. Demonstrations of affection by teachers are unnecessary because learning is basically an unemotional experience.

3. Students who have a part in establishing a grading system for their use are less likely to complain than those who do not.

4. Straightforward criticism of his work may effectively motivate a child who is capable of achieving, but who is not doing so.

5. A teacher who tries to give help or direction to an emotionally disturbed student is likely to upset the student even more seriously.

6. Calling on a shy student frequently encourages him to participate.

7. A classroom which is very carefully organized around lectures and detailed assignments tends to reduce the students' intellectual curiosity.

8. Having information about a child from one of his previous teachers, before actually working with that child, will frequently bias the teacher's judgment of him.

9. Praise or criticism should be given to all students according to the same standard, if the teacher is to be respected for fairness.

10. The teacher can often clarify a matter for a pupil and his classmates by rephrasing that pupil's answer to a question.

11. Students can be motivated to work harder by setting us classroom activities with competition among teams selected by ability levels.

12. Subgrouping of large groups is not necessary to meet the needs of most elementary school children.

13. Strong decisive encouragement is all that is necessary to get most shy students to speak up.

14. Protecting the student with emotional difficulties from situations which remind him of his problems helps to prevent these difficulties from becoming more serious.

15. Youngsters in school need to have the limits of situations carefully defined for them, since reasoning with them usually doesn't work very well.

Form 12c

16. The slow learner achieves more when assigned only tasks which he can easily perform.

17. Often a student who learns very poorly in a subject may improve, if only he is given strong encouragement and the sense of security that goes with it.

18. Even undeserved praise will encourage more productive work on the next assignment.

19. Students who are not well liked by classmates need the teachers help in learning to "get along" with others.

20. Knowing each pupil's name and recognizing his particular achievements, while praiseworthy, does not contibute appreciably to the mental health of the pupils.

21. Students who give glib explanations of their behavior will usually accept the real reasons for it quite readily when the teacher or principal points them out.

22. A student's time should be scheduled carefully so that there are no periods of the day that are wasted in non-productive activity.

23. In order to increase the chances that parents' responses in conferences with the teacher will produce the most constructive effects on the child's behavior and learning, the teacher should consult with the principal before meeting the parents.

24. A common hazard in teaching is that we often have unrealistic expectations for our pupils.

25. In order to learn self-discipline and develop good work habits, students should be made to complete tasks they do not like.

26. An emotionally disturbed pupil is likely to show real improvement, if the classroom teacher gives him advice about what has caused his disturbance and what to do about it.

27. A student may lack the ability to achieve in certain important areas, but, to prevent a severe sense of failure, teachers should discover and encourage him to develop any other talents he may possess.

28. Relatively flexible teaching procedures and assignments tend to produce greater amounts of creative work from pupils.

29. If the very anxious child perceives his teacher as a protector on whom he can depend for security in school, his anxiety will be reduced.

Form 12c

30. The teacher's standards of behavior and academic achievement should be maintained for all pupils in the classroom, even if a few children are thereby made resentful or afraid.

31. The progress of the entire class is likely to be impeded by the presence of children who are considerably below grade level in achievement.

32. A child who is seclusive and isolated from other pupils may be in need of help with emotional problems.

33. So that students will often experience the reward of success, school assignments should generally be easy at first, but they should be made more difficult as students' knowledge and skill increase.

34. A class is more easily controlled if seats are arranged in a regular pattern and each student is assigned a specific seat.

35. If only he can be persuaded that he will do better if he tries harder, a student who seems to lack ability in a certain subject frequently may show a real and lasting improvement in it.

36. If unpopularity with classmates underlies a child's poor learning in school, his teacher should help him develop ways to "get along" better with others.

37. A good teacher can usually get to the bottom of a child's learning or emotional difficulties without the help of counselors, psychologists, physicians, speech therapists, etc.

38. If a student's "nervous tension" arises from fearing the consequences of his actions, it can be reduced by preventing his engaging in wrong actions.

39. Most students respond best to a teacher who defines very firm limits and enforces them fairly.

40. In order to maintain fairness, a poor academic performance must be evaluated as such, regardless of the outside circumstances that might have influenced the student (such as illness or death in the family.)

41. If the teacher does not permit the pupil to give his reasons for a poor academic performance, the pupil may become angry and resentful.

42. Telling a student his behavior is unreasonable or irritating to people with whom he wishes to get along will influence him to control that behavior.

43. Spending classroom time helping students with their everyday problems and their emotional difficulties prevents the teacher from dealing sufficiently with necessary subject matter.

Form 12c

44. When many students are inattentive in class, the teacher may need to evaluate and change the teaching procedures being used.

45. When the teacher carefully organizes and closely controls children's school work the intellectual curiosity and creativity of pupils is likely to increase.

46. If a child appears unable to do the work required of him in the classroom, a careful investigation should be made to find out the reasons.

47. Children differ one from another, but this should not affect the standards on which the teacher criticizes or praises pupil behavior and achievement.

48. A student of high scholastic ability should compete with other students of high ability.

49. Difficult assignments and requirements should be made to almost every pupil so that they will learn that school success comes mainly from hard work and effort.

50. A teacher may help a child to learn better simply by listening sympathetically to his difficulties.

51. A failing student often might improve his performance in a subject, if his teacher could find some way to help him become less anxious, tense, resentful, or defiant.

52. Sometimes the teacher can help a troubled child best by enlisting the ideas and continuing assistance of that child's classmates.

53. The best thing a teacher can do for a seclusive, retiring child is to make him stand up to life's demands.

54. Preventing a problem student from doing something he knows is wrong before he actually does it will lessen his nervous tension, because his fears of the consequences of his acts are lessened.

55. A thoroughly orderly, carefully organized, classroom environment gives children a great sense of security.

56. Students who achieve successfully in school are nearly always comfortable with themselves and others.

57. A pupil's anger and resentment, perhaps growing out of a teacher's failure to listen to the child's reasons for a poor academic performance, may cause that pupil to perform poorly again.

58. Let's face it, the teacher usually hasn't the time or the energy to be concerned about children's personal problems and about their school achievement.

Form 12c

59. It is relatively unimportant for the child's welfare that teachers should vary assignments and requirements to fit the different abilities of different children.

60. When a student shows a deep interest and knowledge of one subject, he often seems "odd" to the other children.

61. The pupil who is aggressive toward, or defiant of, the teacher should generally be punished for his misconduct.

62. It is important to the emotional welfare of the student that he should know his achievement will be judged by reasonable standards.

63. The teacher should see to it that no pupil has to face unreasonable competition in his schoolwork.

64. If a student really wants to learn and achieve well in school, he can usually do so by putting forth enough effort and hard work.

65. Sympathetic listening by a teacher to a child's personal problems won't usually help the child to better understand his difficulties.

66. A student who says he "just hates" a subject, such as reading or math, may really need the teacher's help in order to understand that his "hate" masks his true fear of failure.

67. In order to create a sound environment for learning, the teacher should generally maintain a relaxed and friendly attitude toward students.

68. The teacher usually can be pretty sure that the child who is always courteous and well-behaved has few, if any, emotional problems to handicap him.

69. A really effective teacher finds ways to cause children to learn well without arousing needless tensions and anxiety in them.

70. The idea that school children can sometimes adequately determine their own aims for learning is nonsense.

71. Students who perform well in class do not need to be complimented since they will be aware of their success.

72. In order to prevent them from developing more serious problems later on, students who experience emotional difficulties or school learning problems should be quickly referred for help to appropriate specialists, such as counselors, in the school system.

73. Every child in the classroom should have clear ideas of what the teacher expects him to do and to accomplish.

Form 12c

74. We should leave the students' personal troubles and behavior to the home and the church, and let the school concentrate on training students' minds.

75. Any school subject can be taught in an intellectually honest way to almost any child, but different ways of teaching it must be developed for different kinds of children, if they are to learn effectively.

76. The student who relies on the more mature judgment of teachers and parents about how much time he should spend in study, and who seeks frequent direction about how to study most effectively, will achieve greater academic success than one who does not.

77. To teach a child really well, the teacher needs to know a great deal more about that child's feelings, interests, and talents than can be learned from his tests and examinations.

78. Keen competition to meet high standards of achievement is emotionally beneficial for every pupil.

79. Many of the school children who seem troubled, anxious, seclusive, or resentful should be made to "measure up" in the regular classroom instead of being given special classes, counseling services, and the like.

80. Clear rules, firmly enforced in the school and classroom, are more effective in maintaining discipline than is reasoning with pupils about their behavior.

81. Most underachievement is caused by laziness on the part of the student.

82. If a shy, retiring child fails to answer when called upon, the teacher should continue to press him until he attempts to respond.

83. When you get right down to essentials, the teacher is the one person who must always determine just what must be learned and how it is to be learned.

84. The teacher's job is to teach his subject; therefore, he should be relatively unconcerned about the students' emotional reactions and personal troubles.

85. Children can't be taught effectively without some thwarting of their individual desires and interests, but such thwarting should be kept to a minimum.

86. The teacher should see to it that every pupil's work is judged by clear standards.

87. One of the most important things a teacher can do for children is to show a serious concern for their emotional well-being.

Form 12c

88. There is little need for the teacher to devise different approaches to teaching a subject to different kinds of children.

89. The student who concentrates intently on one subject is in danger of becoming too narrow in outlook.

90. Generally, the more information one has about a child's abilities, accomplishments, interests, and problems, the better he can be taught in school.

91. Pupils will often be greatly harmed by being pressed to compete against standards which are very difficult for them to attain.

92. There's been too much overprotective concern for seclusive, passive pupils; they should be made to "face up" to life in school.

93. A regular, carefully arranged, and unchanging classroom seating pattern promotes effective learning better than does a pattern that permits changes in seating according to the nature of the work in progress.

94. Hostility toward his classmates may be a symptom of the child's hostility toward the teacher.

95. Unless you tell school children exactly what to do and how to do it, they tend to become anxious and somewhat tense.

96. Children need to be helped to "feel at ease" in themselves, if they are to learn well in school.

97. If the teacher didn't ignore most of the individual interests and problems of pupils they would often fail to learn what they absolutely should for effective living.

98. The teacher should seek ways of helping individual pupils to cope with their personal tensions and difficulties as well as with their school learning problems.

99. Teachers have been lectured too much about taking individual differences into account, when basically, they should deal with all pupils in much the same way.

100. It doesn't much matter if the teacher has lots of information about the child from tests, home visits, and the like, because such information can't really help the teacher to do a better job.

101. There is entirely too much tendency in our society to expect teachers and other school personnel to pay attention to the emotional problems of pupils.

102. When a child tells the teacher about his personal troubles, the teacher should give him clear, specific advice on how to deal with them.

Form 12c

103. Children who tend to be discourteous and rowdy in school often need help to clear up difficult emotional problems.

104. If they expect children to learn well in school, teachers should give them help in understanding their worries, fears, and resentments.

105. A teacher who wants to do an effective job must generally allow children's own desires and interests to enter into their learning to a marked degree.

106. If a troubled child tells the teacher of his worries, fears, and resentments, the teacher should try to "dig out" and explain the true reasons for them.

107. If these pupils who have emotional difficulties would just get down to business in school, most of their troubles would clear up.

108. Every pupil should be helped to realize clearly that the teacher is concerned about him as a person regardless of how well he behaves and achieves in school.

109. Even though many of a child's problems, fears, worries, and the like might seem unimportant to most adults, the teacher should take them seriously until they are proved to be insignificant.

110. Most school children's emotional difficulties are pretty superficial and insignificant.

REV. CRF-2
10/1/65

CONSULTATION REPORT FORM

DATE______________________

DATE NEXT APP'T.______________

CONSULTEE NAME______________ CLIENT NAME______________ CBC NAME____________

Coordinates

1. CBC Code
2. Client Code________
3. Visit No. about this client__________
4. Visit No. with this consultee_________
5. Consultee Status
   (1) Teacher, (2) Principal, (3) Nurse, (4) Speech therapist,
   (5) Other therapist, (6) Visiting teacher, (7) Counselor
   (8) Other ______________
6. Consultee Code______________________

Client Demography

7. Client ethnic group
   (1) White, (2) Negro, (3) Latin, (4) Oriental (5) Other________
8. Client status
   (1) Student, (2) Principal, (3) Other teacher,
   (4) Speech therapist, (5) Janitor, (6) Visiting teacher
   (7) Other therapist, (8) Other ______________
9. Client grade
   (1) K, (2) 1, (3) 2, (4) 3, (5) 4, (6) 5, (7) 6
10. Client sex
    (1) Male, (2) Female
11. Client family size (No. of siblings)
    (1) 0, (2) 1, (3) 2, (4) 3, (5) 4, (6) 5, (7) 6, (8) 7
    (9) More than 7
12. Client parental unit status
    (1) Both parents, (2) Mother only, (3) Father only,
    (4) Foster parents, (5) Guardians, (6) Institution

13. Index of social disorder

(1) Mild, (2) Mod., (3) Mod. severe, (4) Severe

14. Client Classification

(1) Reg. student, (2) Spec. Ed., (3) Other ____________________

15. Is this child a problem to others as well

(1) No, (2) One other teacher, (3) Several others,

(4) Problem to all

Characteristics of Interview

16. Where interview held

(1) Hall, (2) Lounge, (3) Classroom, (4) CBC Office

(5) Other____________________________

17. How contact made

(1) Unplanned, (2) Short term planned, (3) Set week in adv.

18. Length of interview

(1) Less than 5 min., (2) 5-9, (3) 10-14, (4) 15-19,

(5) 20-24, (6) 25-29, (7) 30-34, (8) 35-39, (9) 40-44

(10) 45 and over

19. Type of consultation

(1) Individual, (2) Grp 2-3 T., (3) Grp 2-3 T & Sp.

(4) Grp 2-3 T & Prin., (5) Grp 4 or more teachers

(6) Other__________________________

20. Formality of interview

Low 1, 2, 3, 4, 5, 6, 7, 8, 9 High

General Behavior of Consultee (Check one alternative after each number)

21. ____Outgoing, expressive, talks freely

____Shy, quiet, talks hesitantly

22. ____Organized, consistent

____Loose, flexible

23. ____Emphasizes difficulties in a situation

____Emphasizes good aspects of a situation

24. ____Initiates action, seeks out authority

____Passive, avoids authority

25. ____Has psychological insight, is "psychologically" oriented

____Not very insightful, is not "psychologically" oriented

CBC-Consultee

26. Introduces personal material

Minimum 1, 2, 3, 4, 5, 6, 7, 8, 9 Maximum

27. Introduces administrative material

Minimum 1, 2, 3, 4, 5, 6, 7, 8, 9 Maximum

28. Attitude toward CBC - Hostility

Low 1, 2, 3, 4, 5, 6, 7, 8, 9 High

29. Attitude toward CBC - Interdependency

Dependent 1, 2, 3, 4, 5, 6, 7, 8, 9 Independent

30. Attitude toward CBC - Defensiveness-Receptivity

Defensive 1, 2, 3, 4, 5, 6, 7, 8, 9 Receptive

31. Attitude of consultee toward consultant - Interest

Interested 1, 2, 3, 4, 5, 6, 7, 8, 9 Rejecting

32. Emotional state of consultee

Unemotional 1, 2, 3, 4, 5, 6, 7, 8, 9 Emotional

33. How consultee's personal adjustment problems affect his handling of client's problems

No Personal Problems 1, 2, 3, 4, 5, 6, 7, 8, 9 Personal Problems Interfere Greatly

Origins and Approach to Case

34. Source of referral

(1) Initiated by teacher, (2) Principal, (3) Different teacher,

(4) Speech therapist, (5) Nurse, (6) Visiting teacher,

(7) Other ____________________

35. Duration of symptomatology (teacher's perception)

Recent 1, 2, 3, 4, 5, 6, 7, 8, 9 Long standing

36. Reason for referral now

(1) Decision needed, (2) Aggrevation of symptoms

(3) Increased concern, (4) None discernable

37. Consultee use of records

Inappropriate 1, 2, 3, 4, 5, 6, 7, 8, 9 Appropriate

38. Consultee use of resources

Inappropriate 1, 2, 3, 4, 5, 6, 7, 8, 9 Appropriate

39. Consultee familiarity with similar problems

None 1, 2, 3, 4, 5, 6, 7, 8, 9 Maximum experience

40. Consultee press for CBC to see client

None 1, 2, 3, 4, 5, 6, 7, 8, 9 Maximum

41. Rapport between consultee and CBC

Poor 1, 2, 3, 4, 5, 6, 7, 8, 9 Excellent

Consultee-Client Relationship

42. Classification of client's emotional handicap (Bowers)

1, 2, 3, 4, 5, 6, 7

43. Consultee approach to client

Coercive 1, 2, 3, 4, 5, 6, 7, 8, 9 Permissive

44. Consultee approach to client

Directive 1, 2, 3, 4, 5, 6, 7, 8, 9 Non-directive

45. Consultee approach to client

Fixed 1, 2, 3, 4, 5, 6, 7, 8, 9 Adaptive

46. Consultee attitude toward client

Involved 1, 2, 3, 4, 5, 6, 7, 8, 9 Uncommitted

47. Consultee attitude toward client - Hostility

Low 1, 2, 3, 4, 5, 6, 7, 8, 9 High

48. Consultee attitude toward client

Dependent 1, 2, 3, 4, 5, 6, 7, 8, 9 Independent

49. Consultee attitude toward client - Defensiveness

Low 1, 2, 3, 4, 5, 6, 7, 8, 9 High

50. Consultee attitude toward client

Rejecting 1, 2, 3, 4, 5, 6, 7, 8, 9 Receptive

51. Consultee attitude toward client - Tolerance in emergencies

Low 1, 2, 3, 4, 5, 6, 7, 8, 9 High

52. Consultee attitude toward client - Dumping syndrome

Low 1, 2, 3, 4, 5, 6, 7, 8, 9 High

53. Initiative of Consultee in handling psychological problems of client

Ignores 1, 2, 3, 4, 5, 6, 7, 8, 9 Very Interested

54. Attitude of consultee toward client - Openness toward psych. problems

Refuses Client Discussion 1, 2, 3, 4, 5, 6, 7, 8, 9 Eagerly Elicits Discussion

55. Preventive activity taken by consultee with reference to this client

Minimum 1, 2, 3, 4, 5, 6, 7, 8, 9 Maximum

56. Preventive committment or attitude toward child behavior problems

Minimum 1, 2, 3, 4, 5, 6, 7, 8, 9 Maximum

57. Preventive activities engaged in by consultee with reference to his clients in general

Minimum 1, 2, 3, 4, 5, 6, 7, 8, 9 Maximum

CBC Consultee Assess.

58. Problem as stated____

____

____

59. CBC Recognition of problem

Uncertain 1, 2, 3, 4, 5, 6, 7, 8, 9 Certain

60. Concern of consultee appropriate to situation

Inappropriate 1, 2, 3, 4, 5, 6, 7, 8, 9 Appropriate

61. Responsibility of consultee to situation

Irresponsible 1, 2, 3, 4, 5, 6, 7, 8, 9 Responsible

62. Confidence of consultee in coping with situation

Low 1, 2, 3, 4, 5, 6, 7, 8, 9 High

63. Main theme as perceived by CBC

2 columns______________________

64. Certainty of CBC assessment of theme

Uncertain 1, 2, 3, 4, 5, 6, 7, 8, 9 Certain

65. Secondary theme

2 columns______________________

Message Sent

66. Message given

Vague & diffuse 1, 2, 3, 4, 5, 6, 7, 8, 9 Loud and clear

67. Primary message

2 columns______________________

68. Secondary message

2 columns______________________

69. How was primary message sent

(1) Anecdotal, (2) Discussion, (3) Reference to previous case or cases (4) Other______________________________

70. How was secondary message sent

(1) Anecdotal, (2) Discussion, (3) Reference to primary case, (4) Reference to other cases, (5) Other________________

71. Reception of primary message

Low 1, 2, 3, 4, 5, 6, 7, 8, 9 High

72. Acceptance of primary message

Rejection 1, 2, 3, 4, 5, 6, 7, 8, 9 Acceptance

73. Time set for another appointment

(1) Yes, (2) Tentative, (3) No, (4) Other

For second and succeeding interviews with consultee:

Second and Succeeding Interviews

74. Change in situation for previous primary client

No change 1, 2, 3, 4, 5, 6, 7, 8, 9 Great change

75. Positive directionality of change

None 1, 2, 3, 4, 5, 6, 7, 8, 9 Positive change

76. Evidence of primary theme reduction

None 1, 2, 3, 4, 5, 6, 7, 8, 9 Completely resolved

77. Evidence of interpretation of primary message given previous session

Distorted 1, 2, 3, 4, 5, 6, 7, 8, 9 As given

78. New activity by consultee in relation to client

No 1, 2, 3, 4, 5, 6, 7, 8, 9 Yes

79. Restructuring of attitudes toward client

None 1, 2, 3, 4, 5, 6, 7, 8, 9 Maximum

80. New figures brought into case

(1) Father, (2) Mother, (3) Principal, (4) Counselor,

(5) Other________________________

81. Evidence of interpretation of secondary message

Distorted 1, 2, 3, 4, 5, 6, 7, 8, 9 As given

82. Evidence of secondary theme reduction

None 1, 2, 3, 4, 5, 6, 7, 8, 9 Maximum

83. New problems with same client

(1) No, (2) Yes

84. Condition of client on termination of consultation

No improvement 1, 2, 3, 4, 5, 6, 7, 8, 9 Problem solved

85. Statement of evidence and activity________________________

____

____

Form 20a

Mr.
Miss
Your Name (Please Print) Mrs.................................... Code No............
(Last) (First) (Middle)

Name of School:........................ School District:.................

City:................................ State:..........................

AUTOBIOGRAPHICAL DATA FORM

Orientation

To discover how various kinds of teachers, as groups rather than as individuals, make use of the Visiting Consultants during the years of this project, it is necessary to ask each of you to fill in this Autobiographical Form. The data which you supply will be used only to establish groups of teachers of similar sex, age, education, and so on. We are absolutely not interested in the responses of individual teachers as individuals, but useful group comparisons cannot be made without first obtaining information from each of you individually.

For the reasons just mentioned, your answers to the items on this form are extremely important! The more frankly you answer these items, the more valuable your information will be. Since it is not planned to ask you to fill in this Form at any later time, these matters are even more important than otherwise would be true.

Special Note

This form has been designed so that your responses can be punched directly into IBM punch cards for machine processing. Your name will be given a "Code Number" before your responses are transferred to punch cards. After your answers have been punched, this cover sheet, bearing your name, will be destroyed!

The information which you supply about yourself will not be made public, and no specific person will be identified in any of the research analyses.

How to Answer

1. You may use either a pen or a pencil in marking your answers in this Form.

2. This Form is not a test! However, most of it is written in multiple choice form, because this facilitates punching the answers on IBM cards. You are requested to select one of the several possible choices given in each item.

3. Please record your answers by encircling the number of the one choice for each item which you consider to be the best, or most accurate, answer for you.

4. Please be sure to answer all of the items. And do read each item, including each of the possible responses, carefully before answering. Where blank spaces are provided, please write your answer, when relevant.

5. Work just as rapidly as possible! Generally, your first reaction is adequate. If you do not know the exact answer to an item, please give your best estimate.

Maximum Time: 30 minutes

Form 20a

1. Your present age in years:

   1. 21-25 years
   2. 26-30
   3. 31-35
   4. 36-40
   5. 41-45
   6. 46-50
   7. 51-55
   8. 56-60
   9. 61-65
   10. Other: _______ years (Please specify)

2. Your present marital status:

   1. Single
   2. Married
   3. Separated
   4. Divorced
   5. Widowed
   6. Remarried

3. How many children do you have?

   1. None
   2. One
   3. Two
   4. Three
   5. Four
   6. Five
   7. Six or more

4. Typical kind of community in which you lived longest as a child:

   1. Rural or farm
   2. Less than 500 people
   3. 500-2500 people
   4. 2501-7500 people
   5. 7501-10,000 people
   6. 10,001-25,000 people
   7. 25,001-100,000 people
   8. 100,001-500,000 people
   9. More than 500,000 people

5. How many times did your family move from one community to another before you reached 18 years of age?

   1. Family did not move
   2. Family moved only once
   3. Moved 2-3 times
   4. Moved 4-6 times
   5. Moved more than 6 times

6. What kinds of moves did your family make most often?

   1. From one city to another
   2. From one state to another
   3. To another neighborhood in the same community
   4. From one country to another

7. What was the most typical type of home in which you lived as a child?

   1. Rented house
   2. Rented apartment
   3. Parental-owned house
   4. Other (Please specify)

   ____

8. How many brothers, living or deceased, do you have?

   1. None
   2. One
   3. Two
   4. Three
   5. Four
   6. Five
   7. Six
   8. Seven
   9. More than 7

9. How many sisters, living or deceased, do you have?

   1. None
   2. One
   3. Two
   4. Three
   5. Four
   6. Five
   7. Six
   8. Seven
   9. More than 7

10. How do you rank with your brothers and/or sisters in age?

    1. Only child
    2. Eldest child
    3. Older than the middle child, but not the eldest
    4. Middle child
    5. Younger than the middle child, but not the youngest
    6. Youngest child

11. What was your father's age when you were born?

    1. 18 or less
    2. 19-21 years
    3. 22-25 years
    4. 26-30 years
    5. 31-36 years
    6. 37-44 years
    7. 45-55 years
    8. Over 55 years

12. What was your mother's age when you were born?

    1. 18 or less
    2. 19-21 years
    3. 22-25 years
    4. 26-30 years
    5. 31-36 years
    6. 37-44 years
    7. 45-55 years
    8. Over 55 years

13. If your parents were separated by death, divorce, or other circumstances, what was your age when this occurred?

    1. Under one year
    2. One to three years
    3. Three to five years
    4. Five to seven years
    5. Seven to nine years
    6. Nine to eleven years
    7. Eleven to thirteen years
    8. Thirteen to fifteen years
    9. Over fifteen years

14. Your home situation during most of childhood and youth:

    1. Lived with relatives of my family
    2. Lived in a foster home
    3. Lived in a children's home
    4. Parents separated or divorced--lived with each part of time
    5. Parents separated or divorced--lived with one parent only
    6. Reared by friends of family
    7. One parent deceased; lived with survivor
    8. Was adopted
    9. Lived with both natural parents

15. As a child, about how much traveling did you and your family do? We traveled:

    1. Almost constantly; true transients
    2. Very frequently; several long trips each year
    3. Frequently; one long trip and some shorter ones each year
    4. One long trip each year
    5. Average--2 week vacation in summer
    6. Infrequently--a short trip each 2 or 3 years
    7. Rarely--one or two fairly short trips in 8 or 10 years
    8. Never

16. During elementary school years, as you recall them, about how often did you consult with your teachers regarding things that were important to you?

    1. Never
    2. Rarely
    3. Occasionally
    4. Fairly often
    5. Frequently
    6. Very frequently

17. What was the general state of your health during elementary school years?

    1. Extremely bad
    2. Very poor
    3. Poor
    4. Average (Neither good nor bad)
    5. Good
    6. Excellent
    7. Virtually perfect

18. What was the highest level of formal education completed by your father?

    1. Grade school or less
    2. High school, but did not graduate
    3. High school diploma (graduated)
    4. Commercial, trade, or similar schooling beyond high school
    5. Some college, but did not graduate
    6. College graduate (Bachelor's degree)
    7. Some postgraduate study, but no graduate degree
    8. Master's degree
    9. Doctor's degree (Ph.D., M.D., *et al*.)

19. What is (was) the specific occupation of your father during most of the time you were growing up? Write the exact occupation here, please:

    ____

    ____

    (Example: Farmer, owner, 150 acres)

20. Using the classification system below, indicate the nature of your father's main specific occupation during most of the years you were growing up. (Circle appropriate number)

    1. A job requiring no specialized education--for example, Watchman, Hospital Attendant, Laborer, Farm Worker, Domestic, *et al*.
    2. Job requiring some training and experience--*e.g.*, Fireman, Typist, Truck Driver, Waiter, Farm Tenant.
    3. Job requiring some specialized training, an apprenticeship, or considerable experience--*e.g.*, Barber, Chef, Aviator, Cashier, Photographer, Carpenter, Clerical or Sales Work, Policeman, Mechanic, Bookkeeper, Electrician, Stenographer.
    4. A job of a semi-professional nature requiring high school education plus technical school or equivalent--*e.g.*, Contractor; Minister without a college degree; Chiropractor; Police Sergeant; Small Business Owner; Employment Manager; Registered Nurse; City Inspector; Auto, Bond, Insurance, and other Sales; County Agent; Technician.
    5. Professional and Managerial with middle-level responsibilities--jobs requiring college degree or equivalent, but not a graduate degree--*e.g.*, Elementary or High School Teacher; Librarian; Editor; Accountant; CPA; Veterinarian; Pharmacist; Social Worker; Large Landowner; Office or Department Manager.
    6. Professional and Managerial with upper-level, independent responsibilities--jobs requiring graduate degrees, including the doctorate or equivalent, when relevant--*e.g.*, Professional Engineer; College Professor with Ph.D. or equivalent; Industrial Tycoon; Superintendent of Large School System; Physician or Surgeon; Creative Artists; U. S. President and Cabinet Officers.

21. What is (was) the specific occupation of your paternal grandfather during most of the time you were growing up? Write the exact occupation here, please:______________________

____

(Example: Farmer, owner, 150 acres)

22. Using the classification system given in item number 20, what was (is) the chief occupation of your paternal grandfather?

    1. Job requiring no specialized education
    2. Job requiring some training and experience
    3. Job requiring some special education, apprenticeship, or considerable experience
    4. Job of a semi-professional nature, or small business owner
    5. Professional or Managerial, middle level
    6. Professional or Managerial, Independent responsibility

23. Highest level of formal education completed by your mother?

    1. Grade school or less
    2. High school, but did not graduate
    3. High school diploma (graduated)
    4. Commercial, trade, or similar schooling beyond high school
    5. Some college, but did not graduate
    6. College graduate (Bachelor's degree)
    7. Some postgraduate study, but no graduate degree
    8. Master's degree
    9. Doctor's degree (Ph.D., M.D., et al.)

24. Using the classification system given in item 20, what is (was) the chief occupation of your mother during the years you were growing up?

    1. Job requiring no specialized education
    2. Job requiring some training and experience
    3. Job requiring some special education, and apprenticeship or considerable experience
    4. Job of a semi-professional nature, or small business owner
    5. Professional or Managerial, middle level
    6. Professional or Managerial, Independent responsibility
    7. Housewife

25. Which of the following best describes the chief source of the income of the supporting head of your family during most of your growing up years?

    1. Share in the profits from a farm, ranch, or business operated for someone else who owned it
    2. Wages paid by the hour, day, week, or piece
    3. Retirement or pension earned while working
    4. Salary paid by monthly or yearly rate
    5. Profits from a farm or ranch or a business owned by your family
    6. Income from rental properties
    7. Commissions based on quantity (amount) sold (insurance or appliance salesman, etc.)
    8. Fees paid for professional services (lawyer, physician, etc.)
    9. Income from interest on savings, inheritance, investments, royalties, etc.

26. How many students were in your high school graduating class?

    1. 25 or fewer
    2. 26-50
    3. 51-99
    4. 100-200
    5. 201-300
    6. 301-500
    7. 501-800
    8. more than 800

27. What was your overall high school grade average?

    1. Below C-
    2. C-
    3. C
    4. C+
    5. B-
    6. B
    7. B+
    8. A-
    9. A

28. Among the following, which is the highest group or honor in which you were included in your high school graduating class?

    1. Lowest 25 per cent of class
    2. Lower half of class
    3. Upper half of class
    4. Upper one-third of class
    5. Upper 25 per cent of class
    6. Upper 10 per cent of class
    7. Salutatorian: 2nd highest
    8. Valedictorian: highest student

29. During high school, how many organizations or clubs did you participate in actively? (Social, academic, honorary, et al.)

    1. None
    2. One
    3. Two
    4. Three
    5. Four
    6. Five
    7. Six or seven
    8. Eight to ten
    9. More than ten

30. How many times were you elected or appointed to offices in organizations of which you were a member while in high school?

    1. Never
    2. Once
    3. Twice
    4. Three times
    5. Four times
    6. Five to seven times
    7. Eight to ten times
    8. More than ten times

31. Of people about your own age, with which group were you most likely to be associated during high school years?

    Those who:

    1. had good imaginations. They had new ideas and new ways of doing things.
    2. seemed to enjoy everything they did. They welcomed the chance to do new things.
    3. saw things to do and went ahead and did them on their own initiative.
    4. knew when they had done things well and had confidence in what they'd done. They didn't need to be encouraged by others to feel self-confident.
    5. were sort of quiet. They were often "just not noticed" very much.
    6. depended upon older people for advice about quite a few things. They liked to have the approval of their elders.
    7. had to be told pretty much how to do things. They didn't very much like to do things on their own.
    8. were frequently "left out" of things. They didn't seem really to care what others thought of them, and others tended to "leave them out".
    9. didn't seem to enjoy life very much. They did enough to get by, but not much more.

32. How many close friends did you have during high school years?

1.	None	6.	Five
2.	One	7.	Six or seven
3.	Two	8.	Eight to ten
4.	Three	9.	More than ten
5.	Four		

33. When did you first think about becoming a teacher?

1. Before entering grade school
2. While in elementary school
3. During junior high school
4. When in high school
5. As a college freshman or sophomore
6. As a college junior or senior
7. Immediately after college graduation
8. After college and after trying out another occupation
9. Always planned to teach

34. What is (was) your father's religious, or Church, affiliation?

Note: First encircle the correct group number, then underline the correct denomination.

1. Jewish
2. Roman Catholic
3. Unitarian; Universalist
4. Episcopalian; Lutheran; Presbyterian
5. Congregational; Methodist
6. Baptist; Disciples of Christ (Christian Church); Church of Christ
7. Quaker; Christian Science; Mormon
8. Pentecostal; Gospel Tabernacle; Holiness; Jehovah's Witnesses
9. Other: ____________________
10. Not affiliated with any Church

35. Concerning Church attendance, Father:

1. Did not attend
2. Attended services extremely rarely
3. Attended Church only on occasion
4. Attended Church about once a month
5. Attended about twice a month
6. Regularly attended general Sunday service only
7. Regularly attended all Sunday services
8. Regularly attended all Sunday services and others during the week in addition

36. How would you characterize your father with respect to religious matters?

1. Religion was the dominant concern of his life
2. Religious concerns were very important to him, but not predominant
3. Religious matters were neither of more nor less concern to him than other matters, but he was not indifferent
4. He was more or less indifferent to religious matters
5. He was sometimes impatient with religious matters and concerns
6. He regarded religious matters as irrelevant to him
7. He rejected religion and its concerns

37. What is (was) your mother's religious, or Church, affiliation?

    Note: First encircle the correct group number, then underline the correct denomination.

    1. Jewish
    2. Roman Catholic
    3. Unitarian; Universalist
    4. Episcopalian; Lutheran; Presbyterian
    5. Congregational; Methodist
    6. Baptist; Disciples of Christ (Christian Church); Church of Christ
    7. Quaker; Christian Science; Mormon
    8. Pentecostal; Gospel Tabernacle; Holiness; Jehovah's Witnesses
    9. Other: ________________
    10. Not affiliated with any Church

38. Concerning Church attendance, Mother:

    1. Did not attend
    2. Attended services extremely rarely
    3. Attended Church only on occasion
    4. Attended Church about once a month
    5. Attended about twice a month
    6. Regularly attended general Sunday service only
    7. Regularly attended all Sunday services
    8. Regularly attended all Sunday services and others during the week in addition

39. How would you characterize your mother with respect to her concern for religious matters?

    1. Religious matters were the dominant concern in life
    2. Religious concerns were very important to her, but not predominant
    3. Religious matters were neither of more nor less concern to her than other matters, but she was not indifferent
    4. She was more or less indifferent to religious matters
    5. She was sometimes impatient with religious matters and concerns
    6. She regarded religious matters as irrelevant to her
    7. She rejected religion and its concerns

40. In your childhood home, did all the family attend Church services together?

    1. Almost always
    2. Regularly
    3. Quite often
    4. About half the time
    5. Occasionally
    6. Only irregularly
    7. Rarely
    8. Never

41. What is your religious, or Church, affiliation?

    1. Jewish
    2. Roman Catholic
    3. Unitarian; Universalist
    4. Episcopalian; Lutheran; Presbyterian
    5. Congregational; Methodist
    6. Baptist; Disciples of Christ (Christian Church); Church of Christ
    7. Quaker; Christian Science; Mormon
    8. Pentacostal; Gospel Tabernacle; Holiness; Jehovah's Witnesses
    9. Other: ________________

42. Concerning Church attendance, I:

    1. no longer attend services
    2. attend services extremely rarely
    3. attend Church only on occasion
    4. attend Church about once a month
    5. attend about twice a month
    6. regularly attend the general service on Sunday only
    7. regularly attend all services on Sunday
    8. regularly attend all Sunday services and other services during the week in addition

43. How would you characterize yourself with respect to your concern for religious matters?

    1. Religious matters are the dominant concern in my life
    2. Religious concerns are very important to me, but are not predominant ones
    3. Religious matters are neither of more nor less concern to me than are other matters, but I'm not indifferent
    4. I am more or less indifferent to religious matters and concerns
    5. I am sometimes impatient with religious matters and concerns
    6. I regard religious matters as irrelevant to me
    7. I reject religion and its concerns

44. What was your primary reason for going to college or university?

    1. Had no choice; parents sent me
    2. To find a husband (or wife)
    3. To keep up the family tradition
    4. Mainly to be with my friends
    5. To gain academic knowledge
    6. To put myself in a position to earn a living
    7. It was just "the thing to do"
    8. Because I wanted to become a teacher
    9. Other: ____________________

    ____

45. The grade average I made during my freshman year in college: (A=4.00; B=3.00; C=2.00; D=1.00; F=0.00)

    1. .50 to .99
    2. 1.00 to 1.49
    3. 1.50 to 1.99
    4. 2.00 to 2.49
    5. 2.50 to 2.99
    6. 3.00 to 3.24
    7. 3.25 to 3.49
    8. 3.50 to 3.74
    9. 3.75 to 4.00

46. When I completed college, my overall grade average was: (A=4.00; B=3.00; C=2.00; D=1.00; F=0.00)

    1. 1.50 to 1.99
    2. 2.00 to 2.24
    3. 2.25 to 2.49
    4. 2.50 to 2.74
    5. 2.75 to 2.99
    6. 3.00 to 3.24
    7. 3.25 to 3.49
    8. 3.50 to 3.74
    9. 3.75 to 4.00

47. What was the primary source of your support while in college or university?

    1. Parents
    2. Spouse
    3. Relatives
    4. Inheritance
    5. Self-earned funds
    6. Borrowed funds
    7. Annuities
    8. Scholarship (s)
    9. Other

48. About what percentage of your college expenses did you earn by working?

    1. None
    2. 5-10 per cent
    3. 10-25 per cent
    4. 25-40 per cent
    5. 40-60 per cent
    6. 60-75 per cent
    7. 75-90 per cent
    8. 90-95 per cent
    9. 100 per cent

49. From what kind of college did you earn your bachelor's degree? (Note: If you do not have a degree, what kind of college have you attended the longest?)

    1. State university offering graduate degrees such as M.A. and Ph.D.
    2. Privately endowed university offering B.A. and graduate degrees
    3. University or college in another country
    4. State supported 4-year college offering B.A. degree but not graduate degrees
    5. Privately endowed or Church-related 4-year college offering B.A. degree but not graduate degrees
    6. State supported teachers' college
    7. Junior (2-year) college
    8. Have not attended college or university

50. What was your major subject field in college work?

    Please write here:______________

51. If you were to return to college, would you study the same major field?

    1. Definitely not study same major
    2. Probably not study same major
    3. Uncertain
    4. Probably would study same major
    5. Definitely would study same major

52. What three courses taken in college did you most enjoy?

    ____

    ____

    ____

53. What college courses did you find most tedious?

    ____

    ____

    ____

54. What courses taken in college have been most helpful to you in teaching?

    ____

    ____

    ____

55. When did you decide to become a teacher?

    1. During elementary school years
    2. While in junior high school
    3. During high school years
    4. As a college freshman or sophomore
    5. As a college junior or senior
    6. Immediately after college graduation
    7. As a graduate student in university
    8. After college and after trying out another occupation
    9. I always planned to teach

56. How long have you been a teacher?

    1. This is my first year
    2. 1 to 5 years
    3. 6 to 10 years
    4. 11 to 15 years
    5. 16 to 20 years
    6. 21 to 25 years
    7. 26 to 30 years
    8. 31 to 35 years
    9. 36 to 40 years
    10. 40 years or more

57. In how many schools have you taught during your career?

    1. One
    2. Two
    3. Three
    4. Four
    5. Five
    6. Six
    7. Seven
    8. Eight
    9. Nine or more

58. How long have you taught in this school district?

    1. This is first year
    2. This is second year
    3. This is third year
    4. This is fourth year
    5. This is fifth year
    6. Six to ten years
    7. Eleven to fifteen years
    8. More than fifteen years

59. Your present state of health:

    1. Extremely bad
    2. Very poor
    3. Poor
    4. Average (neither good nor poor)
    5. Good
    6. Excellent
    7. Virtually perfect

60. Of the following, which tends to inconvenience you most?

    1. Hay fever
    2. Migraine headaches
    3. Skin disorders
    4. Back trouble
    5. Allergies
    6. Chronic upset stomach
    7. Asthma
    8. Colitis
    9. None of these

61. Of the following, which tends to inconvenience you most?

    1. Arthritis
    2. Diabetes
    3. Heart condition
    4. High blood pressure
    5. Trouble sleeping
    6. Spells of dizziness
    7. Hands tremble
    8. Hands feel damp
    9. None of these

62. What is the most typical type of home in which you have lived as an adult? (After marriage if married)

    1. Rented house
    2. Rented apartment
    3. Own house
    4. Parent's or in-law's house
    5. Other: ______________

63. What is the specific occupation of your spouse? Write the exact occupation here, please: ____________

    ____

    (Example: Farmer, owner, 150 acres)

64. Using the classification system in item 20, indicate the nature of your spouse's main specific occupation. (Circle appropriate number)

    1. Job requiring no specialized education
    2. Job requiring some training and experience
    3. Job requiring some special education, and apprenticeship or considerable experience
    4. Job of a semi-professional nature, or small business owner
    5. Professional or Managerial, middle level
    6. Professional or Managerial, Independent responsibility
    7. Housewife

65. What is the highest level of formal education completed by your spouse?

    1. Grade school or less
    2. High school, but did not graduate
    3. High school diploma (graduated)
    4. Commercial, trade, or similar schooling beyond high school
    5. Some college, but did not graduate
    6. College graduate (Bachelor's degree)
    7. Some postgraduate study, but no graduate degree
    8. Master's degree
    9. Doctor's degree (Ph.D., M.D., et al.)

66. If you had it to do over again, would you go into teaching?

    1. Definitely yes
    2. Probably yes
    3. Uncertain
    4. Probably not
    5. Definitely not

67. Assuming that she had the necessary personal characteristics, would you encourage a daughter to be a teacher?

    1. Definitely yes
    2. Probably yes
    3. Uncertain
    4. Probably not
    5. Definitely not

68. Assuming that you had a son with the necessary personal qualities, would you encourage him to be a teacher?

    1. Definitely yes
    2. Probably yes
    3. Uncertain
    4. Probably not
    5. Definitely not

69. Do you have a part-time job at present?

    1. Yes
    2. No

Form 20a

70. Who do you believe had the greatest influence on your values, attitudes, and interests?

    1. My father, definitely
    2. Probably my father
    3. Father and mother equally
    4. Probably my mother
    5. My mother, definitely
    6. A relative other than one of my parents--please specify: (e.g., aunt) ______________________
    7. An individual other than a parent or relative

You are requested to rate the person or relationship whose name appears at the top of each series using the scales which are below the name. For example, if you feel that the person named at the top of the page is best characterized at either end of a scale or somewhere between, put an X in the place on each scale which best describes what the person named means to you.

Please work at a fairly high speed. Do not worry or puzzle over any item. It is your first impression that we want.

71. The general atmosphere of your childhood family was:

    1. Happy ____:____:____:____:____:____:____ Unhappy
    2. Cold ____:____:____:____:____:____:____ Warm
    3. Simple ____:____:____:____:____:____:____ Complicated
    4. Relaxed ____:____:____:____:____:____:____ Tense
    5. Pessimistic ____:____:____:____:____:____:____ Optimistic
    6. Emotional ____:____:____:____:____:____:____ Unemotional
    7. Democratic ____:____:____:____:____:____:____ Authoritarian
    8. Satisfied ____:____:____:____:____:____:____ Dissatisfied
    9. Competitive ____:____:____:____:____:____:____ Cooperative
    10. Dynamic ____:____:____:____:____:____:____ Static

72. Overall, you recall your own childhood as:

1. Happy _____:_____:_____:_____:_____:_____:_____ Sad
2. Dangerous _____:_____:_____:_____:_____:_____:_____ Safe
3. Trusting _____:_____:_____:_____:_____:_____:_____ Suspicious
4. Warm _____:_____:_____:_____:_____:_____:_____ Cold
5. Carefree _____:_____:_____:_____:_____:_____:_____ Anxious
6. Calm _____:_____:_____:_____:_____:_____:_____ Stormy
7. Lonely _____:_____:_____:_____:_____:_____:_____ Not lonely

73. Would you characterize yourself as a child of elementary school age as:

1. Leader _____:_____:_____:_____:_____:_____:_____ Follower
2. Moody _____:_____:_____:_____:_____:_____:_____ Even disposition
3. Dependent _____:_____:_____:_____:_____:_____:_____ Independent
4. Active _____:_____:_____:_____:_____:_____:_____ Passive
5. Outgoing _____:_____:_____:_____:_____:_____:_____ Shy
6. Vivacious _____:_____:_____:_____:_____:_____:_____ Quiet
7. Controlled _____:_____:_____:_____:_____:_____:_____ Erratic
8. Serene _____:_____:_____:_____:_____:_____:_____ Stormy
9. Aggressive _____:_____:_____:_____:_____:_____:_____ Withdrawing
10. Predictable _____:_____:_____:_____:_____:_____:_____ Unpredictable

74. How would you describe your relationship with your mother?

1. Cooperative _____:_____:_____:_____:_____:_____:_____ Competitive
2. Cold _____:_____:_____:_____:_____:_____:_____ Warm
3. Relaxed _____:_____:_____:_____:_____:_____:_____ Tense
4. Accepting _____:_____:_____:_____:_____:_____:_____ Rejecting
5. Good _____:_____:_____:_____:_____:_____:_____ Bad
6. Trusting _____:_____:_____:_____:_____:_____:_____ Suspicious
7. Democratic _____:_____:_____:_____:_____:_____:_____ Authoritarian
8. Dangerous _____:_____:_____:_____:_____:_____:_____ Safe
9. Happy _____:_____:_____:_____:_____:_____:_____ Unhappy
10. Emotional _____:_____:_____:_____:_____:_____:_____ Unemotional

75. How would you describe your relationship with your father?
    1. Cooperative _____:_____:_____:_____:_____:_____:_____ Competitive
    2. Cold _____:_____:_____:_____:_____:_____:_____ Warm
    3. Relaxed _____:_____:_____:_____:_____:_____:_____ Tense
    4. Accepting _____:_____:_____:_____:_____:_____:_____ Rejecting
    5. Good _____:_____:_____:_____:_____:_____:_____ Bad
    6. Trusting _____:_____:_____:_____:_____:_____:_____ Suspicious
    7. Democratic _____:_____:_____:_____:_____:_____:_____ Authoritarian
    8. Dangerous _____:_____:_____:_____:_____:_____:_____ Safe
    9. Happy _____:_____:_____:_____:_____:_____:_____ Unhappy
    10. Emotional _____:_____:_____:_____:_____:_____:_____ Unemotional

76. How would you describe your father's disposition?
    1. Happy _____:_____:_____:_____:_____:_____:_____ Unhappy
    2. Cold _____:_____:_____:_____:_____:_____:_____ Warm
    3. Simple _____:_____:_____:_____:_____:_____:_____ Complex
    4. Relaxed _____:_____:_____:_____:_____:_____:_____ Tense
    5. Accepting _____:_____:_____:_____:_____:_____:_____ Rejecting
    6. Pessimistic _____:_____:_____:_____:_____:_____:_____ Optimistic
    7. Emotional _____:_____:_____:_____:_____:_____:_____ Unemotional
    8. Democratic _____:_____:_____:_____:_____:_____:_____ Authoritarian
    9. Satisfied _____:_____:_____:_____:_____:_____:_____ Dissatisfied
    10. Dynamic _____:_____:_____:_____:_____:_____:_____ Static

77. How would you describe your mother's disposition?
    1. Happy _____:_____:_____:_____:_____:_____:_____ Unhappy
    2. Cold _____:_____:_____:_____:_____:_____:_____ Warm
    3. Simple _____:_____:_____:_____:_____:_____:_____ Complex
    4. Relaxed _____:_____:_____:_____:_____:_____:_____ Tense
    5. Accepting _____:_____:_____:_____:_____:_____:_____ Rejecting
    6. Pessimistic _____:_____:_____:_____:_____:_____:_____ Optimistic
    7. Emotional _____:_____:_____:_____:_____:_____:_____ Unemotional
    8. Democratic _____:_____:_____:_____:_____:_____:_____ Authoritarian
    9. Satisfied _____:_____:_____:_____:_____:_____:_____ Dissatisfied
    10. Dynamic _____:_____:_____:_____:_____:_____:_____ Static

NEED FOR ASSISTANCE SCALE

Form 19a

INSTRUCTIONS

For a classroom teacher many situations arise which require decision and action. These situations cover a wide variety of problems in such areas as discipline and motivation. Many of them you handle almost without thinking; others you feel competent to handle but you may require time to consider the best manner of solving them. In still others, you feel a need for assistance from the principal, nurse, counselor, psychologist, or other specially trained personnel.

Listed below are a number of examples of situations and incidents which occur in school. Please indicate, on the separate answer sheet, the extent to which you would want assistance in each case. Assume that appropriately qualified personnel are available. Indicate your response by filling in the spaces under the letter designating your choice according to the following code:

A. Would seek assistance every time
B. Would seek assistance frequently
C. Would seek assistance occasionally
D. Would seek assistance only rarely
E. Would seek assistance never

EXAMPLE:

If, finding yourself with the following situation in your classroom, you would rarely seek help, you would mark the item as follows:

1. Joey is constantly eating chalk in class.

A	B	C	D	E
===	===	===	███	===

NOTE: PLEASE OBSERVE THAT IN ANSWERING ITEMS YOU PROCEED ACROSS THE ANSWER SHEET.

PLEASE USE A #2 PENCIL.

1. A fifth grade girl stares out the window more than she pays attention to anything in class.

2. A child appears flushed after coming in from recess on a warm day.

3. Alice constantly exaggerates and tells untrue stories about her family and experiences.

4. One of the boys in class shoots a spit-wad at one of the others.

5. Jerry is reading below class level and you have no measures of ability for him.

6. Freddie, who is ten, cries every time his mother is a few minutes late in picking him up after school.

7. Bill seems unable to see the blackboard from the back of the room, so you have moved him to the front, but he still has trouble.

8. No matter how you handle Bobby's obvious bids for attention, he continues making demands on you.

9. The entire class is noisy, even after repeated warnings to be quiet.

10. You are teaching a new unit in mathematics and there is material in the curriculum guide with which you are not familiar.

11. You have found a fifth grade boy drawing naked human figures several times.

12. You believe that a sixth grade boy who has been absent is claiming sickness falsely.

13. Greg constantly wiggles and squirms and seems unable to sit quietly.

14. You have tried being patient with Tommy, but he continues to run in the hall, to poke other students, to be loud at the wrong times.

15. George, who is far ahead of the other children in mathematics and reading, loses interest in what is going on and is becoming a behavior problem.

16. A fifth grade child continually writes you love notes and talks about marrying you.

17. Mabel, usually an energetic child, has been lethargic lately but has not complained of being ill.

18. A third grade boy has come to class extremely upset several times and you have heard that his home life is quite disruptive.

19. The whole class left the room when the bell rang, but before you dismissed them.

20. The children do not seem interested in the new text for social studies, finding it difficult to read.

21. When George cannot have his way, he does not object but becomes very tense and red in the face.

22. Bobbie has been exposed to an infectious disease; she shows no signs of illness and does not want to miss school.

23. Ruth is so shy that she gets sick when asked to give an oral report.

24. You have talked to Frank about cheating on his homework, but he obviously is still copying his assignment from someone else.

25. There are several students in your class who seem very hesitant to speak and any class discussion soon turns into a lecture.

26. A clique of girls in the fourth grade has ostracized Ann, and she has no other friends.

27. Ralph often complains of stomach pains and asked to be excused from strenuous activity, although his parents have noted no health problems on his record.

28. Herman transferred into your class in the middle of the semester and has had difficulty making friends.

29. Ann, a bright but seemingly lazy student, comments loudly after an assignment has been made, "What happens if we don't do it?"

30. The children in your class seem unusually bright and are bored by the materials suggested in the curriculum guide.

31. Posey, who is eight, seems mature for her age in most ways, yet continues to talk in a lisping "baby talk."

32. A first grade child has been sent home repeatedly after vomiting spells but always comes back the next day.

33. A fifth grade girl in your class will not sit like a young lady; even after you have talked to her privately, she continues to expose herself unduly.

34. You find the entire class out of their seats when you return to the room after taking a report to the office.

35. This year's class, though average in ability, does not seem to be able to grasp rudimentary grammar.

36. Don, who is in the fourth grade, appears overly concerned with grades and becomes quite depressed when he does not get the highest mark in the class.

37. Billy is a thin, very pale, and listless child who brings a very scanty lunch to school each day.

38. Andrea takes no interest in her school work but spends all her time reading and drawing pictures.

39. Last week, Ralph, who is in the sixth grade, was made to scrub the wall where he had marked it with a pencil; today you find him writing on his desk.

40. An interesting unit you are teaching would be enriched by supplementary materials to which you have no immediate access.

41. Rick is constantly being picked on by the other boys but seems too frightened to stand up and fight back.

42. Larry always seems to have very noticeable sores and bruises on his arms and legs.

43. Alex has an abnormal and morbid fascination with guns and knives, refuses to join other children in sports, and prefers to play war games alone.

44. A little girl uses some swear words out loud in front of the class.

45. It is obvious that several children in the class lack the proper background to move on with the lesson plan you have prepared, however, the rest of the class is eager to progress.

46. Gwen is sensitive about a birthmark on her face, refuses to join the other children in any games, and always seems to be trying to hide.

47. Karen explains that she constantly has rashes on her hands and arms because she is "allergic" to so many things.

48. Tom asks to be excused to go to the restroom continually; the other boys have told you that he washes his hands over and over and avoids the other boys for fear of picking up germs.

49. Brett always "drags his feet" and mutters under his breath when asked to do anything.

50. Bill is interested in science and says English is sissy, dampening the enthusiasm of the class for their first experience with poetry.

PERSONNEL SERVICES RESEARCH CENTER
The University of Texas
Austin, Texas

THIS IS A SURVEY NOT A TEST Form 11b1

We need your help. We are evaluating teacher reactions to student behavior. This behavior may or may not be symptomatic of later more serious problems. The items in this questionnaire have been drawn from a pool of statements counselors, principals, and supervisors have reported as having various degrees of undesirability.

Your responses, as professional teachers, in daily contact with the problems of students, will be very helpful to us. Please indicate the degree to which you feel the behavior expressed in these statements is irritating to you.

Use the separate answer sheet to indicate your responses. Please mark the answer in the following way:*

Not at all irritating
1. A■■■B===C===D===E===
Slightly irritating
1. A===B■■■C===D===E===
Moderately irritating
1. A===B===C■■■D===E===
Quite a bit irritating
1. A===B===C===D■■■E===
Highly irritating
1. A===B===C===D===E■■■

Thus if the behavior is not irritating to you, fill in the "A" space opposite the item number on the score sheet. If the item is highly irritating, you would mark the "E" space opposite the item number on the score sheet. There are no right or wrong answers. This is a survey not a test. Please be sure you have checked all the items.

*NOTE: PLEASE OBSERVE THAT IN ANSWERING ITEMS YOU PROCEED ACROSS THE ANSWER SHEET. PLEASE USE PENCILS ONLY.

Form 11b1, 2, 3

1. Is always tapping foot or drumming fingers.

2. Threatens teacher verbally.

3. Tells smutty jokes.

4. Complains "Nobody loves me."

5. Fails to carry out tasks (School Assignments).

6. Shakes head, looks blank or puzzled, states "I don't know" when words previously understood are spoken to him.

7. Rises in class and opens or closes windows without permiesion.

8. Carves on desk

9. Expresses appreciation of others' acts.

10. Forgets to raise hand to talk but just blurts out.

11. Shoots craps in hall, bathroom.

12. Makes vulgar signs with hands and fingers.

13. Says "Everyone picks on me."

14. Finishes task last, askes for help, makes mistakes.

15. Withdraws, remains quiet, does not talk back when others shove, hit, accuse, or criticize him.

16. Leaves seat to sharpen pencil--walk around room.

17. Makes bets for money with classmates.

18. Expresses delight over the happiness of others (claps hands, says "That's good.")

19. Wiggles and squirms during lecture.

20. Cheats on tests.

21. Passes dirty pictures.

22. Demands "his share," "his rights," and complains of unfairness even when equal shares or privileges have been distributed.

23. Spells poorly.

24. Does not participate in group activities, stays in background.

25. Refuses to conform to ceremonials--flag salute, devotional, etc.

26. Leaves waste paper on floor.

27. Expresses desire to "get ahead", to accomplish, to become great or famous.

28. Bites nails.

29. Lacks cleanliness--"this kid needs a bath".

30. Uses dirty language.

31. Says "You like Billy more"; "You gave him more than you did me."

32. Performs below demonstrated ability.

33. Seems to daydream.

34. Violates class rules.

35. Writes on desk.

36. Discusses own problems with others.

37. Chews on pencil.

38. Walks out during class when ordered to do something.

39. Pulls up girls skirts.

40. States "I'll get even!" "You won't get away with that!" "I'll show him."

41. Says, "I can't do it." "I'm not any good at that." Leaves task when he fails.

42. Looks out of window and just shuts out rest of class and teacher.

43. Consistently complains about grades, questions teacher's grading system.

44. Flips coins in classroom before class starts.

45. States "I'm sorry," "Won't you forgive me" more than others do. (Expresses great remorse, apologizes repeatedly, cries after hurting or telling untruths or destroying property.)

46. Jumps from one activity to next, does not finish tasks.

47. Steals others' belongings.

48. Girls and boys tickling each other.

49. Quits or shows anger when loses.

50. Doesn't take advantage of opportunity when teacher comes before school or stays late to give individual help.

Form 11b1, 2, 3

51. Doesn't participate.

52. Reads library books when assignment is not done.

53. Is careless with school property.

54. Sought out by others, others state they like him; among first selected for teams, etc.

55. Is easily upset by changes in things around him.

56. Lies.

57. Girls who dress "older" than their age group.

58. Says "Others are to blame" for own actions.

59. Doesn't do homework.

60. Fails to sit up straight or pay attention to class discussion.

61. Refuses to go along with class decisions.

62. Is destructive with school property.

63. Acts promptly without grumbling, sometimes does more than asked, states "All right."

64. Has changeable moods.

65. Hurts other children (pinches, hits, kicks or other destructive acts).

66. Plays kissing games.

67. Never shows enthusiasm for school work.

68. Consistently wants to do something differently from the other students

69. Marks on the walls with pencil.

70. Makes everything "just right," always puts things in perfect order (perfectionistic, too neat or clean).

71. Moves constantly, "gets into everything," "swarms all over."

72. Teases other children.

73. Interprets things in suggestive manner.

74. Never studies for tests.

75. Asks to do assignment differently than given.

Form 11b1, 2, 3

76. Sticks gum on desks.

77. Expresses worry or concern about bad grades, health, etc.

78. Chatters, keeps talking or interrupting conversation.

79. Pulls other children's hair, punches them, steps on toes.

80. Handles own sex organs.

81. Puts up argument when told he can't do something.

82. Gets school books dirty and torn.

83. Rushes off to do things before instructions are finished, "can't wait."

84. Hits smaller children, "picks on" weaker or smaller children.

85. Writes "dirty things."

86. Erases board when it says "save."

87. Creates unnecessary noise (drops books, shuffles feet.)

88. Becomes "jittery," builds up tensions, becomes "wound up."

89. Fights.

90. Draws "dirty" pictures.

91. Does not take orders when other children are in charge.

92. Stuffs waste paper into desks instead of waste basket.

Form 17a

PUPIL PERSONNEL SERVICES RESEARCH CENTER (IRCOPPS)
1709-2 San Antonio Street
The University of Texas at Austin
Austin, Texas

WHAT IS AN IDEAL PUPIL?

Name_____________________________

School___________________________

Date_____________________________

What kind of person would you like for your pupils to become. Please try to describe the kind of person you would like for your pupils to become by using the check list of characteristics on this sheet. Check each of the characteristics which you think is generally desirable and should be encouraged. Then, double check the five characteristics which you consider most important and should be encouraged above all others. Draw a line through those characteristics which you consider undesirable and should usually be discouraged or punished.

_____ 1. Adventurous
_____ 2. Affectionate
_____ 3. Altruistic
_____ 4. Always asking questions
_____ 5. Attempts difficult jobs
_____ 6. Becomes preoccupied with tasks
_____ 7. Conforming
_____ 8. Considerate of others
_____ 9. Courageous in convictions
_____10. Courteous
_____11. Competitive
_____12. Critical of others
_____13. Curious
_____14. Desires to excel
_____15. Determination
_____16. Disturbs class procedures or organization
_____17. Does work on time
_____18. Domineering
_____19. Feels strong emotions
_____20. Emotionally sensitive
_____21. Energetic
_____22. Fault-finding

Form 17a

_____23. Fearful
_____24. A good guesser
_____25. Haughty and self-satisfied
_____26. Healthy
_____27. Independent in judgment
_____28. Independent in thinking
_____29. Industrious
_____30. Intuitive
_____31. Likes to work alone
_____32. Neat and orderly
_____33. Negativistic
_____34. Never bored
_____35. Obedient
_____36. Persistent
_____37. Physically strong
_____38. Popular, well-liked by peers
_____39. Prefers complex tasks
_____40. Quiet
_____41. Receptive to ideas of others
_____42. Refined
_____43. Regresses occasionally (playful, childlike)
_____44. Remembers well
_____45. Reserved
_____46. Self-assertive
_____47. Self-confident
_____48. A self-starter
_____49. Self-sufficient
_____50. Sense of beauty
_____51. Sense of humor
_____52. Sincere
_____53. Socially well-adjusted
_____54. Spirited in disagreement
_____55. Strives for distant goals
_____56. Stubborn
_____57. Talkative
_____58. Thorough
_____59. Timid
_____60. Truthful, even when it gets him in trouble
_____61. Unsophisticated
_____62. Unwilling to accept things on mere say-so
_____63. Versatile, well rounded
_____64. Visionary
_____65. Willing to accept judgments of authorities
_____66. Willing to take risks

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Form 15a

PERSONNEL SERVICES RESEARCH CENTER

The University of Texas

Austin, Texas

Please indicate the degree to which you agree or disagree with each of the statements on the following pages by responding on the separate answer sheet. Please mark your answer to each item in the following way.*

A.--Agree strongly
B.--Agree in general, but disagree in some specific instances
C.--Undecided
D.--Disagree in general, but agree in a few specific instances
E.--Disagree strongly

Thus, if you "agree strongly" with the item, blacken the space between the dotted lines after "A". If you "disagree strongly" blacken the space found after "E".

*NOTE: PLEASE OBSERVE THAT IN ANSWERING ITEMS YOU PROCEED ACROSS THE ANSWER SHEET. PLEASE USE PENCIL ONLY.

CHILD ATTITUDE SURVEY

1. When you come right down to it, a child is either good or bad and there's not much you can do about it.
2. It is hard to let children go and visit people because they might misbehave when parents or teachers aren't around.
3. With all a child hears on TV and radio and from friends, there's little an adult can do to influence him.
4. If children are quiet for a while you should immediately find out why.
5. Psychologists now know that what a child is born with determines the kind of person he becomes.
6. A mother has a right to know everything going on in her child's life because her child is a part of her.
7. A child may learn to be a juvenile delinquent from playing games like cops and robbers and war too much.
8. A child should be allowed to try out what he can do at times without the parents or teachers watching.
9. Most all children are the same at birth; what happens to them afterwards is important.
10. Parents should make it their business to know everything their children are thinking.
11. There are many things that influence a young child that adults don't understand and can't do anything about.

Form 15a

12. Children must be told exactly what to do and how to do it or they will make mistakes.

13. Many times parents are punished for their own sins through the bad behavior of their children.

14. It is hard to know when to let boys and girls play together where they can't be seen.

15. Most of the bad traits children have (like nervousness or bad temper) are inherited.

16. It is a parent's duty to make sure he knows a child's innermost thoughts.

17. A child that comes from bad stock does not have much chance of amounting to anything.

18. If rules are not closely enforced children will misbehave and get in trouble.

19. Some children are so naturally headstrong that an adult can't really do much about them.

20. More parents should make it their job to know everything their child is doing.

21. Why children behave the way they do is too much for anyone to figure out.

22. An alert parent should try to learn all his child's thoughts.

23. Not even psychologists understand exactly why children act the way they do.

24. Children have a right to activities which do not include their parents.

25. If a child is born bad there's not much you can do about it.

26. Children who are not watched will get into trouble.

27. A child is destined to be a certain kind of person no matter what the parents or teachers do.

28. Children have no right to keep anything from their parents.

29. Some children are just naturally bad.

30. A child should never keep a secret from his parents.

Form 16a

SCHOOL AND COMMUNITY SURVEY

ORIENTATION

Following is a list of general statements about relationships between the teacher, the school, and the community. You may find some of these statements to be extreme; you may think that others are quite reasonable. We should like to find out how school people feel about these statements as applied to their own schools and school systems. We need your frank, honest reactions!

The best response to each statement is your personal opinion about your own present school and community situation. There are no right or wrong answers. You may find yourself in agreement with some of these statements, in disagreement with others, and, perhaps, you may be uncertain about others. But, whether you agree or disagree with any particular statement, you can be sure that many other school people feel much the same way.

HOW TO RESPOND

Please respond to each statement by marking the separate answer sheet, according to how much you agree or disagree with it as applied to your own situation. Respond to every statement. The extent of your agreement or disagreement is to be marked on the answer sheet in the following way:

A--Agree strongly
B--Agree in general, but disagree in some specific instances
C--Undecided
D--Disagree in general, but agree in a few specific instances
E--Disagree strongly

EXAMPLE:

1. Children should be seen and not heard.

1. A=== B=== C=== D=== E===

By blackening the space beside the E you indicate you disagree strongly or very strongly with the statement.

Please be sure you have responded to all of the items in this survey.

*NOTE: PLEASE OBSERVE THAT IN ANSWERING ITEMS YOU PROCEED ACROSS THE ANSWER SHEET.

1. Teacher-student relations are characterized by a minimum of friction and a high degree of cooperation and respect.

2. Most teachers in my school have very high morale.

3. Teaching assignments in this school make good use of the special interests and abilities of the individual teachers.

4. I plan to utilize the valuable experience I have received teaching in this district by going into administrative work in the near future.

5. It would be very difficult to find a school system which would provide more satisfaction to a professional teacher than does my school district.

6. Members of our faculty differ widely on educational matters.

7. Teachers in this school often go through the day in quiet desperation.

8. Present teacher selection procedures in this district secure outstanding colleagues for teaching positions.

9. Much of what teachers are required to teach and to do seems unimportant or meaningless.

10. Faculty meetings in this school almost always contribute to the professional growth and interest of teachers.

11. I would not hesitate to move from this school district if another school system offered a 10% higher salary scale.

12. When a teacher at my school does an exceptionally good job, he is likely to receive praise and public recognition.

13. Differences on educational issues are seldom faced squarely by this school's teachers and administration.

14. Too many of our teachers here are discouraged and cynical about teaching.

15. The salary scale in my school system is entirely adequate, if not ideal.

16. My principal is very effective in maintaining excellent relations with his teachers.

17. Teacher-parent relations in this school are characterized by a mutual understanding of and striving for, the child's welfare.

18. There is a great deal of personal friendship and warmth among the teachers in my school.

19. There is remarkably little dissatisfaction among the teachers in my school.

20. My school-community is an excellent place for a teacher to live and work.

21. Teachers are not only accepted, but they are welcomed into the life of this community.

22. Our Board of Education could scarcely be more concerned than they are about our teachers' welfare.

23. The central administration of our school district shows a very high degree of cooperation with teachers.

24. The fringe benefits offered to teachers in my school district are outstandingly good.

25. Good or outstanding work is consistently and adequately rewarded and recognized in my school.

26. It is a rewarding challenge to try to maintain the high quality of work expected of the teachers in my school.

27. The main objectives of my school are pretty much in line with what I think the objectives of a good school should be.

28. There are very few real difficulties of communication in my school.

29. I seldom feel that teaching is not a worthwhile occupation.

30. Frankly, I find my ambitions extending beyond the work that I am doing now.

31. The stress which our school places on the development of children's social skills works to the disadvantage of the teaching of subject matter.

32. The development of a strong sense of curiosity, a "thirst for knowledge", in children is emphasized by my school.

33. Teaching subject matter is of primary importance in the classroom in this school.

34. The development of a spirit of free intellectual inquiry in pupils is encouraged by both our school administration and faculty.

35. In my school there is great stress placed on teaching the community's standards and values--its attitudes, social behavior and aspirations.

36. The "ideal child" produced by my school should have a balanced background of intellectual, athletic, and social activities.

37. In my school, the importance of thorughly teaching the attitudes and values of society in which the child lives is clearly realized.

38. Generally speaking, my school believes that children must be taught very great respect for the experience and authority of their elders.

39. There is a strong emphasis on good discipline in my school.

40. My school system seems to emphasize the school's role and influence in the formation of a student's character. This school clearly stresses the importance of a teacher's setting a good example and providing appropriate goals for children.

41. In my school there is little real emphasis on teaching a child to deal effectively with his own day to day problems of living in and out of school.

42. My school only gives "lip service" to the aim of developing each child's creative talents.

43. This school emphasizes formal, artistic achievement and appreciation.

44. There is a very strong emphasis on sports, athletic activities, and physical fitness in my school.

45. The importance of each child's developing a *strong desire to excel* at something important is emphasized by this school.

46. Hard work, diligence, and perseverance are felt by my school to be the most important virtues for the child to learn during his school career.

47. In this school, we emphasize the importance of a child's learning to spend his time in useful, productive work.

48. The importance of gaining a sound, general background of knowledge in many fields is stressed in this school.

49. My school emphasizes intellectual activities much more strongly than it does social and practical ones.

50. Social activities are looked upon as a frill in my school and are consistently downgraded.

Form 14b

PROFESSIONAL ROLE EXPECTATIONS INVENTORY

Please base your responses to the following items on the way you would expect the situation to be handled when all the professional personnel named are available. If this is not now actually the case in your building, draw upon your total experience and training to form the basis of your response.

In each case, indicate your responses in the spaces provided in front of the position titles. Place an X in the column headed MOST for the individual most likely and an X in the column headed LEAST for the individual least likely to be responsible for the suggested action or solution.

MOST LEAST 1. Interpret standard achievement test results to pupils.
____ ____ Teacher
____ ____ Counselor
____ ____ Principal

2. Interview a pupil who has been repeatedly absent.
____ ____ Teacher
____ ____ Counselor
____ ____ Principal

3. Develop a complete case study of a problem pupil.
____ ____ Teacher
____ ____ Counselor
____ ____ Principal

4. Assist pupils in developing educational plans.
____ ____ Teacher
____ ____ Counselor
____ ____ Principal

5. Plan curricula for special classes.
____ ____ Teacher
____ ____ Counselor
____ ____ Principal

6. Confer with pupils concerning personal problems.
____ ____ Teacher
____ ____ Counselor
____ ____ Principal

7. Give tests for purpose of classroom grouping.
____ ____ Teacher
____ ____ Counselor
____ ____ Principal

Form 14b

MOST	LEAST		
		8.	Develop in-service training program.
____	____		Teacher
____	____		Counselor
____	____		Principal
		9.	Confer with parents concerning pupil behavior problems.
____	____		Teacher
____	____		Counselor
____	____		Principal
		10.	Confer with pupils regarding moral problems.
____	____		Teacher
____	____		Counselor
____	____		Principal
		11.	Develop a complete case study of a problem pupil.
____	____		Visiting teacher
____	____		School nurse
____	____		Instructional supervisor
		12.	Interview a pupil who has been repeatedly absent.
____	____		Visiting teacher
____	____		School nurse
____	____		Instructional supervisor
		13.	Confer with pupils concerning personal problems.
____	____		Visiting teacher
____	____		School nurse
____	____		Instructional supervisor
		14.	Evaluate severe reading problems of pupils.
____	____		Visiting teacher
____	____		School nurse
____	____		Instructional supervisor
		15.	Confer with pupils regarding moral problems.
____	____		Visiting teacher
____	____		School nurse
____	____		Instructional supervisor
		16.	Confer with parents concerning pupil behavior problems.
____	____		Visiting teacher
____	____		School nurse
____	____		Instructional supervisor

Form 14b

MOST	LEAST		
		17.	Plan curricula for special classes.
____	____		Visiting teacher
____	____		School nurse
____	____		Instructional supervisor
		18.	Develop in-service training program.
____	____		Visiting teacher
____	____		School nurse
____	____		Instructional supervisor
		19.	Assist in identifying exceptional pupils.
____	____		Visiting teacher
____	____		School nurse
____	____		Instructional supervisor
		20.	Investigate truancy problems.
____	____		Visiting teacher
____	____		School nurse
____	____		Instructional supervisor
		21.	Interpret standard test results to parents.
____	____		Counselor
____	____		Assistant principal
____	____		Visiting teacher
		22.	Interview pupils referred for disturbance in class.
____	____		Counselor
____	____		Assistant principal
____	____		Visiting teacher
		23.	Assist in identifying exceptional pupils.
____	____		Counselor
____	____		Assistant principal
____	____		Visiting teacher
		24.	Develop referral procedures between school and community.
____	____		Counselor
____	____		Assistant principal
____	____		Visiting teacher
		25.	Prepare student handbook.
____	____		Counselor
____	____		Assistant principal
____	____		Visiting teacher

Form 14b

MOST LEAST 26. Interpret standard test results to teaching staff.

_____ _____ Counselor

_____ _____ Assistant principal

_____ _____ Visiting teacher

27. Conduct case study conference.

_____ _____ Counselor

_____ _____ Assistant principal

_____ _____ Visiting teacher

28. Schedule use of audio-visual equipment.

_____ _____ Counselor

_____ _____ Assistant principal

_____ _____ Visiting teacher

29. Investigate truancy problems.

_____ _____ Counselor

_____ _____ Assistant principal

_____ _____ Visiting teacher

30. Assess pupils' social adjustment.

_____ _____ Counselor

_____ _____ Assistant principal

_____ _____ Visiting teacher

31. Interpret standard test results to parents.

_____ _____ Instructional supervisor

_____ _____ Teacher

_____ _____ Assistant principal

32. Give tests for purpose of classroom grouping.

_____ _____ Instructional supervisor

_____ _____ Teacher

_____ _____ Assistant principal

33. Prepare student handbook.

_____ _____ Instructional supervisor

_____ _____ Teacher

_____ _____ Assistant principal

34. Conduct case study conference.

_____ _____ Instructional supervisor

_____ _____ Teacher

_____ _____ Assistant principal

MOST LEAST 35. Assess pupils' social adjustment.

____ ____ Instructional supervisor

____ ____ Teacher

____ ____ Assistant principal

36. Conduct general school research.

____ ____ Instructional supervisor

____ ____ Teacher

____ ____ Assistant principal

37. Conduct student orientation program.

____ ____ Instructional supervisor

____ ____ Teacher

____ ____ Assistant principal

38. Develop local norms for standardized tests.

____ ____ Instructional supervisor

____ ____ Teacher

____ ____ Assistant principal

39. Refer pupils with special problems to appropriate specialists.

____ ____ Instructional supervisor

____ ____ Teacher

____ ____ Assistant principal

40. Plan curricula for special classes.

____ ____ Instructional supervisor

____ ____ Teacher

____ ____ Assistant principal

Form 218-1-DM

May 66

ASSESSMENT OF CONSULTATION SERVICE

Introduction

We would appreciate your help in assessing the usefulness of the consultation service in your school system. Please answer each question as candidly as possible. No one but members of the data processing staff at The University of Texas will see this completed form. When you complete this form, please put it in the envelope, seal the envelope and leave it with your school secretary.

Your Name________________________________

Your School District____________________ School Building____________

Town____________________________ State__________

Your position (e.g., Nurse, 5th grade teacher)________________

Directions

PLEASE ENCIRCLE THE NUMBER OF THE MOST APPROPRIATE RESPONSE TO EACH OF THE FOLLOWING QUESTIONS.

1. Is there a Child Behavior Consultant from The University of Texas in your school?

   1. Yes
   2. No, never heard of this service.

   IF YOUR ANSWER TO QUESTION 1 IS YES, PLEASE SKIP QUESTION 2.

2. If your answer to question 1 is no, is it possible that you know of the consultation service under some other name?

   1. No, know nothing about it
   2. Yes

      If yes--What is the service called?________________

   IF YOUR ANSWERS TO THE FIRST 2 QUESTIONS ARE NO, PLEASE TURN IN THE FORM NOW. IF YOUR ANSWERS TO QUESTION 1 or 2 ARE YES, PLEASE CONTINUE.

3. What day or days of the week does the consultant usually visit your school?________________

4. Have you had an opportunity to personally meet the consultant yet?

   1. Yes
   2. No

5. What is the consultant's name?________________________________

6. How many times have you consulted with the consultant about a problem in your classroom or school?

    1. Never
    2. Once
    3. Twice
    4. 3 times
    5. 4 times
    6. 5 times
    7. 6 times
    8. 7 times
    9. More than 7 times

IF YOU HAVE NEVER CONSULTED WITH CONSULTANT, PLEASE SKIP QUESTIONS 7 THROUGH 12 AND CONTINUE WITH QUESTIONS 13 THROUGH 18.

7. What kinds of problems did you bring to the consultant for consultation?

____

____

____

8. Has the consultant been readily available when you want to consult?

    1. Yes
    2. Usually
    3. About as often as not
    4. Occasionally
    5. Difficult to make an appointment

9. Have you had difficulty finding free time in order to talk with the consultant?

    1. No difficulty at all in finding free time
    2. Occasionally some difficulty in finding free time
    3. About as often as not
    4. Usually some difficulty in finding free time
    5. Almost impossible to find free time

10. How useful have the services of the consultant been to you?

    1. Extremely useful and helpful
    2. Very helpful
    3. Helpful
    4. May have been of some help but not certain
    5. Doubtful if of any value
    6. No help at all

11. If the services of the consultant have been helpful to you please describe in what ways they have been helpful.

____

____

12. If the services of the consultant have not been helpful to you please describe why the consultation has not been helpful.

____

____

13. If you have not used the consultant thus far, please indicate why not.

    1. No real problems that needed discussing
    2. Could not make connections due to consultant's busy schedule
    3. Don't really know how the consultant can help me
    4. Have had difficulty finding free time to talk with consultant
    5. Don't think the consultant can be of any help
    6. Don't really feel free to talk with this consultant
    7. Other (Please fill in)__________________________

    ____

14. Even if you have not used the consultant how useful do you believe the services of the consultant have been to your school in general?

    1. Extremely useful and helpful
    2. Very helpful
    3. Helpful
    4. May have been of some help but not certain
    5. Doubtful if of any value
    6. No help at all

15. Do you think that another consultant with somewhat different training, orientation or personality might be more valuable to your school?

    1. Yes, definitely
    2. Yes
    3. Not certain
    4. No
    5. Definitely not

16. If you feel that another person would be more helpful as a consultant, please indicate the kinds of strengths you think he or she should have.

____

____

17. Listed below are a number of ways the consultation service may have been of help to you or your school. Please put a "1" in front of the 4 items about which you think the consultant has been most helpful, and then put a "3" in front of the 4 items concerning which you feel the consultant has been of least value to you or your school.

_____1. Identifying problems in children
_____2. Understanding problems in children
_____3. Confirmation of teachers' judgments
_____4. More knowledge pertaining to human behavior and emotions
_____5. Help with understanding test results
_____6. Better knowledge of resources available
_____7. Helping me take a more realistic viewpoint toward children
_____8. Helping me take a more realistic viewpoint toward myself
_____9. Offer help and suggestions for talking with parents
_____10. Gave ideas which I discussed with other teachers
_____11. Better communication with principal and others in transmitting information about children
_____12. Better understanding of my classroom problems
_____13. Helping me better understand the limitations a school system faces in helping a child

18. Please rank each of the following possible pupil personnel specialists or services in terms of the relative value you think each would probably have in helping children get the most from their school experience. Use the number "1" for the one you think most useful or valuable, "2" for the next most valuable, and so on.

_____1. special education teachers
_____2. speech clinicians
_____3. counselors
_____4. nursing services
_____5. direct psychological and/or psychiatric services to children (diagnosis and treatment)
_____6. school social workers or visiting teachers
_____7. medical services by physicians
_____8. child behavior consultation service
_____9. remedial reading specialists

PLEASE CHECK BACK TO BE CERTAIN YOU HAVE ANSWERED ALL THE QUESTIONS. PUT THE FORM IN THE ENVELOPE, SEAL IT, AND LEAVE THE ENVELOPE WITH YOUR SCHOOL SECRETARY.